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City Council of Gibraltar

ANNUAL REPORT

ON THE

HEALTH OF GIBRALTAR

FOR THE YEAR

1956

BY

JAMES A. DURANTE, M.R.C.S. (Eng.), L.R.C.P. (Lond.).

Medical Officer of Health,

with which is included the Report of the City Pathologist-Analyst.

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Chief Laboratory Assistant and Deputy Analyst:

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Laboratory Assistants:

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Assistant Superintendent of Markets:

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Market Inspectors:

†L. Ortega.
†E. J. Macedo.
J. Reyes.

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†Certificate Inspector of Meat and Other Foods.
0Certificate in General Hygiene of the Royal Institute of Public Health and Hygiene.

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King George V. Chest Hospital:

Physician in Charge:

H. S. PAULL, Esq., M.B., Ch.B. (U. Bristol), D.P.M.

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Child Welfare Services:

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Mrs. M. CASCIARO, S.R.N., Health Visitor.

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Maritime:

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*J. B. G. DOTTO, Esq., M.R.C.S. (Eng.), L.R.C.P. (Lond.)

Air:

J. C. CASSAGLIA, Esq., L.R.C.P., L.R.C.S., L.R.F.P.S.

District Medical Officer:

J. C. CASSAGLIA, Esq., L.R.C.P., L.R.C.S., L.R.F.P.S.

District Nurses:

Mrs. A. JOHNSON, S.R.N.
Mrs. M. SOLECI, S.R.N., S.C.M.

Visiting Dentists:

*A. A. DANINO, Esq., L.D.S., R.C.S. (Eng.)
*J. J. COCHRANE, Esq., L.D.S., R.C.S. (Eng.)

*Allowance paid to private practitioners as a retaining fee for their services.

ADVISORY BOARD OF HEALTH

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The Colonial Secretary.

Members:

The Chief Assistant Secretary, Colonial Secretariat.

The Assistant Director of Medical Services.

The Chief Medical Officer, Colonial Government.

The Medical Officer of Health.

The Royal Naval Representative.

The Royal Air Force Representative.

The Port Medical Officer.

Secretary:

H. T. Norris, Esq.

To His Worship the Mayor and Councillors
of the City of Gibraltar.

I have the honour to present to you my Annual Report on the Health of Gibraltar for the year 1956.

Though there occurred a high prevalence of the common infectious diseases, the City was free from major infections or grave epidemics and the general health of the community may be said to have remained satisfactory throughout the year.

The salient features in the statistical field are a further decrease in the low infantile mortality recorded the preceding year, the maintenance of a low general death rate and a fall in the incidence of Pulmonary Tuberculosis and deaths caused by the disease.

One hundred and ninety-four deaths from all causes occurred during the year which represents a death rate of 8.27 per thousand fixed civil population and a small decrease compared with 1955. Of these, one hundred and thirty-one or 67.5 per cent concerned persons over 65 years of age, and were caused mainly by diseases of the heart and circulation and by degenerative conditions incidental to ageing. It is of interest to note that no less than forty-nine amounting to just over a quarter of all deaths occurred in persons who had attained their eightieth year.

Cancer and other malignant tumours caused twenty-eight deaths. Though this represents a decrease of ten compared with the preceding year and the lowest number recorded since 1949, these diseases continued to constitute the second principal cause of mortality.

Eight persons, all males, which represents 28.5 per cent of all deaths from malignant tumours died from Cancer of the respiratory organs (including the larynx) and it is significant to note that out of a total of seventy-five deaths caused by Cancer of these organs which have been registered in Gibraltar since 1948, seventy-two, amounting to ninety-six per cent of the persons concerned, were males.

The progressive increase in the incidence of malignant disease of the respiratory organs and particularly the very high preponderance of males affected over females has attracted much interest, is causing grave concern, and has been and continues to be the subject of intensive study and investigations in many countries, particularly in Great Bri-

tain. The results of these investigations though still a subject of controversy have established that whatever other factors such as atmospheric pollution by dusts, smokes and gases may be involved, there is clear evidence of a close association between tobacco smoking, particularly in the form of cigarettes and the occurrence of certain types of cancer of these organs, and that the incidence increases in proportion to the number of cigarettes smoked, being highest in the heavy inveterate smokers. Because of social and other implications the subject bristles with difficulties, but there is little if any doubt that there is reasonable justification for advising young people to abstain from acquiring a habit potentially dangerous to health and life, which is easy to contract but may be difficult to control or discontinue.

There was a small increase in the number of births compared with 1955, and births again outnumbered deaths by one hundred and eighty-nine.

Five infants died before attaining the age of one year, which represents a remarkably low infant mortality rate of 13.05, and a considerable decrease compared with the previous year when the corresponding figure was 18.76, at that time the lowest recorded in Gibraltar since the year 1888, when records are first available. These figures are most gratifying and may be considered to reflect the beneficial effects of the improvements in social and environmental conditions which are gradually but progressively being attained since the repatriation of the population. It should be noted however, that prematurity or birth injuries caused the death of four of these infants within four weeks of birth which suggests that prenatal circumstances affected adversely the mother and developing child during pregnancy and labour. These early deaths have for some years past been the principal factor in the loss of child life and constitute a challenge to all concerned to further efforts at improvement.

The general standard of health of the school children is stated in the School Medical Service report to be "extremely good." No less than ninety-six per cent of two thousand, three hundred and ninety-one children who were examined were considered by the Medical Officer concerned to be in perfect health, which together with the close co-operation achieved by the Service with the Education Department and the increasing interest taken by parents and children in the medical examinations would appear to augur well for the future. I regret however, to gather from the Child Welfare report that there has been a further decline in attendances

by mothers at the Infant Welfare Clinics, though the fall in attendances has to some extent been made up by a considerable increase in home visits paid by the Health Visitor.

There is much to be said in favour of home visits, because not only is the Health Visitor able to acquaint herself intimately with the social and environmental circumstances of the mother and child and become familiar and gain the confidence of others in the family who often influence the upbringing of the infant, but can also advice each mother individually to the best purpose. It must however be appreciated that the work is time consuming and requires much patience and perseverance and that unless adequate time is available to her, such visits may lapse into routine calls and prove fruitless.

The common infectious diseases showed the highest incidence since 1951 due mainly to a widespread epidemic of Measles during winter and spring, a minor outbreak of Chicken Pox and an unusual prevalence of Scarlet Fever throughout the year. Though these diseases accounted for eighty-one per cent of all notifications, the infections appear to have been generally benign and caused no deaths.

The occurrence of two severe cases of Diphtheria produced urgent but unfortunately short lived demands from parents for protective inoculations for their children, but nevertheless the number of infants immunized during the year was insignificant and lower than the small number recorded in the previous year.

Notifications of Pulmonary Tuberculosis were the lowest since 1945, and only one death was attributed to the disease. The mortality from this disease was lower than in 1955, (when two deaths occurred), and constitutes the lowest recorded in Gibraltar since 1891 when records are first available. The table in page 27 shows that but for some not unexpected fluctuations the incidence, and particularly the deaths from Pulmonary Tuberculosis have been gradually declining since 1945, and I trust it is not over optimistic to say, that Tuberculosis which in the past has been the outstanding blemish in the health records of our community is now being controlled and maybe is well on the way to being mastered.

Overcrowding remains the most urgent and serious problem which faces the housing and health services, for notwithstanding the impressive number of dwellings which have been provided by the Government since the repatriation of

the population, a considerable number of families still live under very unsatisfactory conditions and are in dire need of rehousing.

Working conditions in factories, workshops and other industrial establishments which had long been the subject of consideration will in future be regulated by the Factories Ordinance 1956 which came into force on the 1st of August. This is by far the most important legal instrument from a public and industrial health aspect enacted during the year under review, and the gradual implementation of its provisions will undoubtedly promote the health and welfare and ensure the safety of persons employed in such places.

It but remains for me to thank the members of the Council for their courtesy and support, my colleagues in other departments for their friendly co-operation, and my staff for their loyalty and unfailing help throughout the year.

I have the honour to be,

Your Worship and Councillors,

Your obedient servant,

J. A. DURANTE,

Medical Officer of Health.

Public Health Department,

City Hall,

Gibraltar, 6th May, 1957.

CITY COUNCIL OF GIBRALTAR

PUBLIC HEALTH DEPARTMENT

Summary of Vital Statistics for the year 1956

Total area of Gibraltar Territory		1,387 acres
Area of the City		104 acres
Estimated Total Civil Population of Gibraltar		25,064 persons
Estimated Fixed Civil Population of Gibraltar		23,443 persons
*Births in Fixed Civil Population,		
Males — 201 Females — 182	.....	383
Birth Rate per 1,000 Fixed Civil Population...		16.33
Birth Rate per 1,000 Total Civil Population...		15.91
*Deaths in Fixed Civil Population		194
Death Rate per 1,000 Fixed Civil Population...		8.27
Crude Death Rate per 1,000 Total Civil Population...		8.81
Infantile Mortality Rate Fixed Civil Population...		13.05
Death Rate from Pulmonary Tuberculosis		0.04

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*Vide note on Page 13.

METEOROLOGICAL OBSERVATIONS FOR THE YEAR 1956

The following weather summary and tables have been kindly supplied by the Air Ministry's Meteorologist in Gibraltar.

The total rainfall for the year 33.29 inches was somewhat below average, and was composed of a very wet period until the end of April (by which time 26.34 inches had fallen — 60 per cent above normal), a fairly typical almost dry period from May-July, and only 6.87 inches from August to December.Only in 1950 has such a small fall been recorded since at least 1925 for the last five months of a year. The daily average sunshine of 7.61 hours was slightly below the North Front average of 7.83 hours. February, March and April were all dull months, May to August were average or slightly sunnier, and September and October were rather dull. In November and December the daily sunshine was $\frac{1}{2}$-$\frac{3}{4}$ hours above the average. The year was the coolest since records have been kept at North Front, the average day maximum temperature of 68.3°F was 3.7°F below normal, and the average minimum of 58.0°F, 1.4°F below normal. Even allowing for the change in position of thermometers which took place in June 1955, these are significant differences. No month was particularly warm, and February, November and September were outstandingly cold, 6.0°F, 4.8°F and 3.6°F below average temperature respectively. The highest temperature recorded, 91°F is the lowest at North Front, the previous lowest maximum being 92°F in 1954. Relative humidity was well below average, with a daily mean of 72.5 per cent compared with the North Front average of 75.3 per cent. It is the only year at North Front that an average of 80 per cent at least has not been reached at some time of the day. The low humidity was largely a matter of less humid nights, and the figure of 63 per cent at 1500 G.M.T. was only 1.1 per cent below average. As a whole there were very slightly more levanter winds than usual, but the year can be regarded as fairly typical. There were several long spells of levanter wind, but on many occasions these were of a comparatively dry origin, and levant cloud and appressiveness were less evident than in most years.

January. Fairly pleasant with very little variance from the normal in many respects, except that the day maximum of 65°F, on both 25th and 26th was (with 15-1-54) the lowest maximum temperature recorded in the month since at least 1946.

February. Wet and exceptionally cold. The rainfall was over 50 per cent above average — although practically all the rain fell on 15th/16th, 19th and 22nd/23rd. The average temperature was 5.0°F below average. The highest temperature of 61°F on 26th was 4°F colder than the most unfavourable February day for at least ten years and the lowest temperature 34°F on 13th was the lowest (except for 33°F on 1st and 2nd February, 1954) for at least twenty years. Winds were mainly westerly and rather stronger than usual.

March. Wet and cool, with markedly deficient sunshine. Rainfall was almost twice normal, and it was the wettest March since 1924; it rained every day from 19th onwards.

April. Similar to March, and was the fourth wet month in succession with rainfall of 5.85 inches (over twice the average), and sunshine 1.3 hours below average. Easterly winds were as frequent as westerlies (unusual in April) and there were two levant spells 1st-11th and 18th-22nd.

May. Proved a very pleasant month after a wet and cold winter. Light rainfall occurred in showers 17th-26th. There were lengthy sunny spells, but the month was the coolest since at least 1947. This was due to an unusually high incidence of easterlies from 1st-19th which were from a northerly source rather than from the Eastern Mediterranean.

June. Another pleasant, cool month with a marked predominance of easterly winds instead of the usual 40 per cent predominance of westerlies; there was a long levanter spell 8th-22nd. It was much the coolest June since records have been kept at North Front, with a night minimum 3.6°F below normal, and 2.4°F below the previous lowest figure in 1953.

July. A normal month, rather cooler than usual, and with an even balance of westerly and levanter winds instead of the usual predominance of easterlies. Fog occurred on several days, and heavy levant conditions were persistent only on 3rd and 31st.

August. Cool and pleasant with an exceptional rainfall of .67 inches (which practically all fell in the morning of the

6th). It was the wettest August this century (except for 1934 when .87 inches fell) and the 6th was the wettest August day since 8th August, 1855 when 1.72 inches fell in a heavy thunderstorm. Westerly winds were more common than easterlies, the opposite of the normal. Fog occurred on several days at the beginning and mid-month, and on two occasions persisted throughout the day (4th and 15th).

September. Cool, but otherwise typical with several short spells of levant conditions, though not associated with fog or heavy cloud over the town.

October. Dry and somewhat dull with cool days and warm nights, the average temperature being just below normal. Easterly winds were unusually frequent but levant cloud was seldom troublesome and there was no fog.

November. Bright and crisp with temperature well below average: not since 1942 has a temperature of 70°F or more not been attained at least once during the month. Rainfall was only a third that of a normal November and half the fall occurred in twenty-four hours midday 16th/17th. All rain was showery, and there was thunder on 16th. There was a typical predominance of westerly winds.

December. Fairly cold, dry and bright with sunshine above average and under a third the annual rainfall. The highest temperature of 63°F was 5°F lower than the previous lowest for North Front, and was the lowest for at least twenty years. Easterly winds blew almost without a break 1st-21st, being much more persistent than usual in December.

Summary. The year 1956 was an unusually cold mainly bright year, with a superfluity of rain in the first four months, and a marked deficiency thereafter.

North Front. **Lat. 36°09' N.** **Long. 05° 21" w.** **Barometer Height 24 Ft.** **Raingauge 8 Ft. Above M.S.L**

YEAR 1956 Month	Mean Pressure at MSL	TEMPERATURE °F													RELATIVE HUMIDITY				CLOUD AMOUNT (EIGHTHS)			
		MEANS							HIGHEST		LOWEST											
		Dry Bulb				Max.	Min.	Mean of	Max	Date	Min	Date	Min on gras	Date	03	09	15	21	03	09	15	21
		0300	0900	1500	2100	A	B	A & B														
January	1018'4	53'4	53'9	59'6	55'3	60'5	51'0	55'7	65	25th, 26th	42	10th 11th	34	11th	81	82	69	81	3'5	4'4	3'3	3'7
February.....	1013'1	49'0	49'2	54'5	50'7	55'2	45'7	50'5	61	26th	34	13th	29	14th	66	67	55	62	3'6	5'0	4'7	3'5
March	1015'6	55'1	56'6	61'1	57'4	62'6	53'2	57'9	72	4th	48	2nd 22nd	42	1st, 2nd, 4th	84	78	67	78	4'7	5'4	4'8	4'6
April.....	1013'8	57'4	58'9	63'1	59'2	64'4	55'3	59'9	71	12th	47	28th	43	28th	83	79	67	78	4'1	5'4	4'9	4'6
May	1020'2	61'1	64'6	68.9	63'9	70'5	59'5	65'0	81	10th	53	1st.27th	46	27th	77	71	58	74	1'9	3'3	3'0	2'0
June	1018'8	65.6	69'2	73'4	67'9	75'3	63'6	69'5	89	17th	58	1st	55	1st	79	71	62	77	2'0	2'9	2'3	1,9
July	1016'8	68'4	72'1	78'5	71'3	80'7	66'2	73'5	91	10th	62	17th	58	8, 9th	76	68	54	71	1'9	2'3	0'8	1'1
August	1014'5	70'5	73'4	79'0	73'4	81'3	67'8	74'5	90	23rd	63	29th	59	29th	75	69	58	69	1'8	2'8	1'8	1'6
September ...	1017'3	66'6	69'3	73'8	68.4	75'2	64'1	69'7	85	14th	57	3rd	54	2nd 3rd	81	73	63	76	3'2	3'5	3'1	3'2
October	1020'2	66'0	67'0	70'3	66'7	71'4	64'4	67'9	79	6th	54	30th	48	31st	84	82	73	85	4'1	4'8	3'5	3'9
November.....	1019.5	55'7	57'1	61'6	57'2	62'6	53'5	58'0	69	4th	47	21st, 30th	37	30th	76	71	64	72	2'7	4'0	4'1	2,4
December	1024'5	54'1	54'4	58'4	55.6	59'5	51'5	55'5	63	1st	43	23rd	34	2nd	78	77	71	79	2'8	4'7	4'1	3'1
Year	1017'7	60'2	62'1	66'9	62'3	68'3	58'0	63'1	91	10/7	34	13/2	29	14/2	78	74	63	75	3'0	4'0	3'4	3'0

North Front. **Lat. 36o'09' N.** **Long. 05o 21' w.** **Barometer Height 24 ft.** **Raingauge 8 ft Above M·S.L.**

YEAR 1956 Month	RAINFALL			SUNSHINE		WEATHER								
						No. of Days of								
	Total mm	Max in 24 hrs. 09-09	Date	Daily Mean Hrs.	o/o of Possible	Rain	Snow	Hail	Thunder	Overcast Sky	Clear Sky	Gales	Fog	Frost
Jan	133.4	29·8	18th	5·46	54·5	20	0	1	2	7	6	0	0	0
Feb	178·6	52·0	15th	5·67	52·3	15	0	2	3	5	4	2	0	2
Mar	207·8	37·4	10th	5·65	47·6	16	0	1	3	5	4	1	0	0
April	149·2	26·2	21st	6·92	52·5	17	0	0	3	3	1	0	0	0
May	2·0	1 8	17th	10·04	71·2	2	0	0	0	0	6	0	0	0
June.....	Trace	Trace	13th	10·74	73·7	0	0	0	0	0	8	0	1	0
July	—	—	—	11·15	77·8	0	0	0	0	0	17	0	4	0
Aug	17.1	9.8	6th	10·44	77·3	2	0	0	1	1	13	0	5	0
Sept	49.0	27.2	23rd	8·23	66·3	5	0	0	4	0	9	0	0	0
Oct	11.9	7.0	14th	6·51	58·1	4	0	0	0	5	3	0	1	0
Nov	54.2	21·9	16th	5·43	52·6	7	0	0	1	5	6	2	0	0
Dec	42·4	24.8	30th	5·07	51·9	9	0	0	1	0	5	1	0	0
Year.....	845'6	52·0	15/2	7·61	61'3	97	0	4	18	31	82	6	11	2

WIND

Frequency at 0300, 0900, 1500 & 2100 G.M.T.

Force 1—3 = 1—10 Knots. Force 4—5 = 11—21 Knots. Force 6—7 = 22—33 Knots.

Force 8 = 34—40 Knots.

YEAR 1956	FORCE					DIRECTION							
MONTHS	8 or over	6-7	4-5	1-3	Calm	N.	NE.	E.	SE.	S.	SW.	W.	NW.
January	—	3	42	75	4	1	15	16	2	6	31	46	3
February	2	20	37	53	4	1	4	37	4	2	13	39	12
March	—	11	34	73	6	5	13	21	—	22	28	26	3
April	—	10	37	65	8	1	3	38	7	6	25	30	2
May	—	3	59	55	7	—	12	54	—	7	23	20	1
June	—	—	45	67	8	—	19	44	2	8	17	22	—
July	—	—	50	66	8	—	7	49	3	9	21	27	—
August	—	—	30	88	6	—	7	29	7	14	29	31	1
September	—	—	29	83	8	—	13	46	4	5	22	21	1
October	—	4	46	69	5	—	16	65	8	5	7	17	1
November	—	9	34	71	6	4	3	32	7	4	9	42	13
December	—	1	62	54	7	2	4	57	3	—	12	35	4
Year	2	61	505	819	77	14	116	488	47	88	237	356	41

VITAL STATISTICS

These statistics are based on the estimated civil population of Gibraltar as shown in the Police Registration Office. They do not include personnel of Her Majesty's Armed Forces and unless otherwise stated, they do not relate to their families, or to non-resident aliens.

The civil population at the end of the year under review was constituted as follows:—

	Adults		Children		
	Men	Women	Male	Female	Totals
Gibraltarians ...	6,196	7,548	2,357	2,240=18,341)	British Subjects 23,443
Other British ...	1,167	1,779	1,097	1,059= 5,102)	
Aliens	638	950	19	14=	1,621
Totals	8,001	10,277	3,473	3,313=	25,064

Compared with the preceding year these figures represent an increase of 352 in the British Fixed Civil Population (92 Gibraltarians and 260 Other British Subjects), and a decrease of 117 in Aliens, which amounts to an increase of 235 in the Total Population.

The alterations in population since 1930 are shown below:—

How Estimated	British Subjects Fixed Population	Alien Subjects Floating Population	Total Population
Police Estimate end of 1930	15,526	922	16,448
Census April 1931	16,188	1,425	17,613
Police Estimate end of 1932	15,143	1,466	16,609
" " " " 1933	15,071	1,326	16,397
" " " " 1934	14,790	1,057	15,847
" " " " 1935	15,735	1,130	16,865
" " " " 1936	16,875	2,319	19,194
" " " " 1937	16,792	2,749	19,541
" " " " 1938	17,222	3,017	20,239
" " " " 1939	18,125	2,315	20,440
1940 to 1944 civil population evacuated during war years			
Police Estimate end of 1945	17,448	1,784	19,232
" " " " 1946	19,269	1,964	21,233
" " " " 1947	20,316	2,216	22,532
" " " " 1948	21,472	2,228	23,700
" " " " 1949	22,208	2,377	24,585
" " " " 1950	22,470	2.416	24,886
Census July 1951	19,739	1,361	21,100
Police Estimate end of 1952	22,176	2,297	24,473
" " " " 1953	22,629	2,107	24,736
" " " " 1954	23,044	1,877	24,921
" " " " 1955	23,091	1,738	24,829
" " " " 1956	23,443	1,621	25,064

*Deaths

One hundred and ninety-four deaths, ninety-six males and ninety-eight females were registered as having occurred in the resident British civil population during the year amounting to 82.7 per thousand. The corresponding figures for 1955 were 200 and 8.66 respectively. In addition there were twenty-seven deaths (including one infant under a year old) amongst non-resident aliens providing a total of two hundred and twenty-one deaths or 8.81 per thousand total civil population. The low level of mortality in the British fixed population established since 1945 was thus maintained.

One hundred and thirty-one deaths or 67.5 per cent of all deaths concerned persons over 65 years of age and thirty-two occurred in the age group 55 and under 65 years.

Thus one hundred and sixty-three deaths or 84 per cent of the total number of deaths occurred in persons 55 years of age or older and were attributed principally to cardio-vascular diseases including those affecting the central ner-

* Vide note on Page 13.

vous system, neoplasms and senility. Thirty-one or 16 per cent of all deaths were contributed by the age groups under 55 years.

The principal causes of death were:—

Cardio vascular diseases	65
Malignant neoplasms	28
Vascular lesions affecting the central nervous system	27
Diseases of the respiratory organs (excluding neoplasms)	16
Senility	12

Pulmonary Tuberculosis continued a negligible factor in the causation of deaths. The pattern of the distribution of causes of death remained the same as in 1955.

Cardio vascular affections contributed 33.5 per cent of all deaths, diseases of the coronary circulation predominating. All deaths from vascular lesions of the central nervous system occurred in persons 55 years of age or older.

Though only twelve deaths were attributed to senility, no less than forty-nine persons (fifteen males and thirty-four females) amounting to 25.2 per cent of all deaths were octogenarians or older.

Malignant neoplasms contributed twenty-eight or 14.4 per cent of all deaths and continued to constitute the second highest cause of mortality. Of the patients concerned, thirteen were males and fifteen females. Five occurred in persons under 55 years of age, the others were 55 years or older.

Eight persons, all males aged 45 years or older died from malignant tumours of the respiratory organs which provided 28.5 per cent of all cancer deaths.

Deaths from malignant neoplasms in 1955 totalled thirty-eight. The yearly average for the decennial period 1947-56 was 32.8.

Deaths from Malignant Neoplasms period 1947-56

Year	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Deaths	26	28	25	32	32	35	39	45	38	28

There was one maternal death from toxaemia of pregnancy.

Deaths by Months and Quarters

January	28	July	12
February	25	August	20
March	18	September	16
1st Quarter	71	3rd Quarter	48
April	20	October	15
May	19	November	15
June	18	December	15
2nd Quarter	57	4th Quarter	45

Includes twenty-seven deaths from cases landed from the Bay or brought into Town for treatment.

***Births**

Three hundred and eighty-three children, two hundred and one males and one hundred and eighty-two females, were born from the civil population during the year 1956 providing a birth rate of 16.33 per thousand fixed British civil population which represents a small increase compared with the preceding year when the corresponding figures were three hundred and seventy-three and 16.15. In addition there were sixteen births to non-resident aliens constituting a total of three hundred and ninety-nine births or 15.91 per thousand total civil population.

The distribution of births between hospitals, private practitioners and midwives was as follows:—

Colonial Hospital	347
Military Hospital	17
Private Practitioners	6
Midwives	29

The preference for confinement in hospital which has been a feature since the repatriation of the population continues.

* Vide note on Page 13.

Illegitimate Births numbered eleven which represents 2.7 per cent of all births. These figures show no material difference compared with the preceding year.

Illegitimate births period 1948-56

Year	1948	1949	1950	1951	1952	1953	1954	1955	1956
Number	10	15	13	17	13	12	8	11	11
Rate per cent of all births	2.69	3.69	3.66	4.29	3.2	3.05	1.9	2.8	2.7

*Infant Mortality

Five infants died before attaining the age of one year which constitutes an infant mortality rate of 13.05 per thousand live births, and represents a considerable decrease in mortality compared with the preceding year when infant deaths numbered 7 or 18.76 per thousand.

The latter was reported in my Health Report for that year as being the lowest infant mortality rate ever recorded in Gibraltar since the year 1888, which renders the further decline in the number of infant deaths which occurred in the year under review all the more encouraging.

It will be noted however, that four of these infants died within four weeks of birth, which provides a neo-natal death rate of 10.44 per thousand, representing an increase of approximately 50 per cent compared with the corresponding rate of 5.36 recorded in 1955.

Notwithstanding that the latter figure is outstandingly low and that these rates are subject to considerable fluctuations particularly when small numbers are involved, it is significant to note that three of the deaths in question were attributed to prematurity and the fourth to birth injuries, in other words to pre-natal circumstances which with but few exceptions are the cause of a considerable proportion of the early infant deaths occurring every year.

*Vide note on Page 13.

The ages and causes of death were as follows:—

CAUSE OF DEATH	Under 1 week	1/2 weeks	2/3 weeks	3/4 weeks	Total under 4 weeks	1/3 months	3/6 months	6/9 months	9/12 months	Total under one year
Prematurity	1				1					1
Bronchopneumonia Prematurity		1		1	2					2
White Asphyxia Birth Injury		1			1					1
Gastro-Enteritis									1	1
Totals	1	2		1	4				1	5

Still Births

Seven still births were registered during the year which amounts to 17.2 per thousand total live and still births. The corresponding figures for 1955 were 8 and 20 per thousand. Statutory registration of still births was first enforced in 1950. Registrations in the years 1950 to 1955 were 9, 17, 8, 9, 3, and 8.

Perinatal Mortality

I am introducing for the first time in these statistics the term "perinatal mortality" to describe the combination of still births with deaths occurring during the first week of life. The reason for the use of this term is clearly explained by Sir John A. Charles, Chief Medical Officer of the Ministry of Health, in his report on the State of the Public Health in England and Wales for the year 1954, as follows:—

> "Perinatal mortality is a measure of the birth loss due to circumstances before and during pregnancy and events during labour and delivery. Still births and early neo-natal deaths have many features in common and it is often a matter of chance whether the foetus dies in utero or dies while being born or just after birth."

The following table shows the combined number of still births and deaths at one week, the perinatal mortality rate per 1,000 live and still births, and the mortality in infants under one year per 1,000 live births for the years 1950-6.

Year	1950	1951	1952	1953	1954	1955	1956
Combined still births and deaths under 1 week—numbers ..	11	19	19	14	10	9	8
Perinatal mortality per thousand total births	30.2	47.0	48.3	36.2	25.5	23.6	20.5
Mortality under 1 yr. per thousand live births	28.16	31	41.55	25.44	33.5	18.76	13.05

Though perinatal mortality shows a tendency to fall since 1953, it still remains the major factor in the loss of infant lives.

INFANTILE MORTALITY AND NEONATAL DEATH RATES FOR THE PERIOD 1945-56

	Infantile Mortality	*Neo-natal Mortality*
1945	32.39	16.4
1946	36.4	9.7
1947	47.2	34.1
1948	29.56	13.5
1949	34.2	24.2
1950	28.16	8.4
1951	31	12.9
1952	41.55	36.36
1953	25.44	22.9
1954	33.5	23.19
1955	18.76	5.36
1956	13.05	10.44

Table of vital statistics for the periods 1930-9 and 1945-56 is appended.

NOTE:—

One hundred and seventy-two births and three deaths which occurred among sections of the population with which these statistics are not concerned are not included in the above data.

The total number of births and deaths which occurred during the year 1956 and the corresponding crude rates were therefore as follows:—

Births ..... 571 or 22.78 per thousand total population.
Deaths ..... 224 or 8.93 per thousand total population.
Deaths in infants under one year ..... 6 or 10.5 per thousand total live births.

VITAL STATISTICS FOR THE PERIODS 1930-9 and 1945-56

Year	POPULATION			DEATHS				INFANTILE MORTALITY		BIRTHS	
	Fixed	Total	How Estimated	Fixed Population No.	Total Population No.	Rate per 1,000 population: Fixed Population	Rate per 1,000 population: Total Population	No.	Rate per 1,000 births	No.	Rate per 1,000 Fixed Population
1930	15,526	16,448	Police Estimate	240	240	15.6	14.5	25	71.3	349	22.4
1931	16,188	17,613	Census	250	254	15.4	14.4	23	61.0	377	23.28
1932	15,143	16,609	Police Estimate	245	259	16.17	15.59	21	60.69	346	22.84
1933	15,071	16,397	,,	241	245	15.99	14.94	14	39.2	357	23.68
1934	14,790	15,847	,,	225	230	15.21	14.51	21	54.8	383	25.8
1935	15,735	16,865	,,	255	265	16.20	15.71	18	67.4	267	16.9
1936	15,735	16,865	,,	249	261	15.82	15.47	19	62.09	304	19.30
1937	16,792	19,541	,,	256	292	15.24	14.93	26	68.24	381	22.69
1938	17,222	20,239	,,	246	278	14.28	13.74	27	74.38	363	21.07
1939	18,125	20,440	,,	276	296	15.22	14.25	30	79.36	378	20.85
Period of evacuation of civil population											
1945	17,448	19,232	,,	155	162	8.88	8.42	20	32.89	608	34.84
1946	19,269	21,233	,,	177	187	9.18	8.8	15	36.4	412	21.38
1947	20,316	22,532	,,	146	148	7.18	6.56	18	47.24	381	18.75
1948	21,472	23,700	,,	176	182	8.19	7.67	11	29.56	372	17.32
1949	22,208	24,585	,,	181	185	8.15	7.52	14	34.2	408	18.37
1950	22,470	24,886	,,	199	207	8.85	8.31	10	28.16	355	15.79
1951	19,739	21,100	Census) Mid-Year)	241	255	12.2	12.08	12	31	387	19.6
1952	22,176	24,473	Police Estimate	191	195	8.61	7.96	16	41.55	385	17.36
1953	22,629	24,736	,,	186	199	8.21	8.79	10	25.44	377	16.66
1954	23,044	24,921	,,	216	227	9.37	9.10	13	33.5	388	16.83
1955	23,091	24,829	,,	200	216	8.66	8.69	7	18.76	373	16.15
1956	23,443	25,064	,,	194	221	8.27	8.81	5	13.05	383	16.33

MATERNITY, CHILD WELFARE AND SCHOOL MEDICAL SERVICES

The Colonial Government are responsible for these services which are operated under the administrative direction of the Chief Medical Officer who is also the Superintendent of the Colonial Hospital. This arrangement ensures a high degree of integration of the preventive and curative organisations concerned.

I am indebted to Dr. K. Edmundson, the Chief Medical Officer, for the following information regarding the progress of these services during 1956 :—

Maternity Service

Ante-natal clinics were held at the Colonial Hospital twice weekly. Attendance was very good. Again the majority of mothers continued to be delivered in the Colonial Hospital. A few cases were delivered in their homes by private doctors or registered midwives.

There were five locally registered midwives engaged in private practice during the year.

The average stay in hospital was 6 days.

There was one maternal death attributed to toxaemia of pregnancy.

Paediatric Service

During the year under review this service continued to function satisfactorily.

The number of out-patients was as follows :—

1956	1955
2,803	2,704

Child Welfare

Clinics were held regularly throughout the year at the three existing centres, viz. Town Clinic twice weekly, Glacis Clinic, in the North side of the town, once weekly, and South Clinic once weekly. Besides these Clinics two Special Clinics a week were held by the Paediatrician in charge, on Tuesdays and Thursdays, and referred cases from other Clinics were atttended and advised.

Children who attended the Child Welfare Centre were referred to the Sick Children Department of the Colonial Hospital, for advice and treatment, when required.

The number of registered infants and attendances at the various centres were as follows:—

Town Clinic

	1956	1955
Number of children registered	591	666
Attendances	5,799	7,551

South Clinic

Number of children registered	144	172
Attendances	1,010	1,948

Glacis Clinic

Number of children registered	61	99
Attendances	514	1,061

Special Clinics held by the Paediatrician

Number of children registered	450
Total number of attendances	1,400
Number of Clinics held	95

YEAR OF BIRTH, AGE GROUP AND NUMBER OF CHILDREN ON THE REGISTER WERE AS FOLLOWS

Town Clinic Total number on the Register: 591

Year of Birth	*Age Groups*	*Number*
1951	Over 5 years	17
1952	4—5	35
1953	3—4	49
1954	2—3	65
1955	1—2	175
1956	0—1	250

South Clinic Total number on the Register: 144

Year of Birth	*Age Groups*	*Number*
1951	Over 5 years	6
1952	4—5	22
1953	3—4	12
1954	2—3	18
1955	1—2	38
1956	0—1	48

Glacis Clinic Total number on the Register: 61

Year of Birth	*Age Groups*	*Number*
1951	Over 5 years	7
1952	4—5	9
1953	3—4	10
1954	2—3	10
1955	1—2	11
1956	0—1	14

Home Visits

Primary	380
Special	60
Ante-natal	67
Children over 1 year	2,909
Children under 1 year	679
Fruitless	438
Removals	108
Centres	2
Houses	2,949

Immunizations (Carried out at the Colonial Hospital)

Anti-diphtheria prophylactic ..... Courses completed: 16

Combined diphtheria-petussis prophylactic ..... Courses completed: 10

School Medical Service

Seventeen out of twenty-one schools were visited during the year, a total of two thousand, three hundred and ninety-one children being examined. The general standard of health was extremely good, and the attitude of teachers and parents was gratifying.

Cases were referred to the relevant clinics when required, and out of all cases, ninety-six per cent were found to be in perfect health. Those under ten years of age were referred either to their own doctors or to the Sick Children's Clinic, which operates three times a week. The lack of playing grounds is to be deplored, but is unfortunately unavoidable in the present cramped and overcrowded areas.

The utmost co-operation was achieved with the Education Department, and the work started by the previous Schools Medical Officer appears to have borne fruit, inasmuch as parents and children alike realise the value of a medical examination, and look forward to it, rather than avoiding it as they used to do in the past.

There is still no provision for the schooling of special or backward cases, a very important item in the education programme.

The problem of the undernourished child is quite clearly a social and not a medical one.

SUMMARY OF DENTAL TREATMENT

Dental Surgeon	Sessions for Treatment	Teeth Conserved	Teeth Extracted	Attendances for Scaling and Gum Treatment
Mr. A. A. Danino...	157	778	326	140
Mr. J. J. Cochrane	34	120	143	20

Causes of Death in the Civil Population during 1956, according to the International Intermediate List with Age and Sex Incidence.

		Cause of Death	Detailed List of Numbers	All Ages	Under 1 yr.		1 yr. & under 5		5 yrs. & under 15		15 yrs. & under 25		25 yrs. & under 35		35 yrs. & under 45		45 yrs. & under 55		55 yrs. & under 65		65 yrs. & under 75		75 yrs. & over	
					M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
A	1	Tuberculosis of Respiratory System ...	001-008	1														1						
A	2	Tuberculosis of meninges and central nervous system	010	1																				
A	46	Malignant neoplasm of stomach	151	1			1															1		
A	47	Malignant neoplasm of intestines, except rectum	152-153	4																	1	3		
A	48	Malignant neoplasm of rectum	154	1															1					
A	49	Malignant neoplasm of larynx	161	1															1					
A	50	Malignant neoplasm of trachea, and of bronchus and lung not specified as secondary	162-163	7													2		3		1		1	
A	51	Malignant neoplasm of breast	170	4														2		1		1		
A	53	Malignant neoplasm of other and unspecified parts of uterus	172-174	2																				2
A	54	Malignant neoplasm of prostate	177	1															1					
A	57	Malignant neoplasm of all other and unspecified sites	155-160 164-165 175-176 178-181 192-195 198-199	5																2	1			2
A	58	Leukaemia and aleukaemia	204	1			1																	
A	59	Lymphosarcoma and other neoplasms of lymphatic and haematopoietic system	200-203 205	1															1					
A	60	Benign neoplasms and neoplasms of unspecified nature	210-239	4											1			1			1		1	
A	62	Thyrotoxicosis with or without goiter	252	1														1						
A	63	Diabetes mellitus	260	9															1	2	1	2	1	2
A	65	Anaemias	290-293	1																	1			
A	66	Allergic disorders; all other endocrine, metabolic and blood diseases	240-245 253-254 270-277 287-289 294-299	1													1							
A	67	Psychoses	300-309	2																1		1		
A	70	Vascular lesions affecting central nervous system	330-334	27															3	1	4	3	4	12
A	79	Rheumatic Fever	400-402	1														1						
A	81	Arteriosclerotic and degenerative heart disease	420-422	50											1		2		3	2	16	5	6	15
A	82	Other diseases of heart	430-434	1																	1			
A	83	Hypertension with heart disease	440-443	7													1					1	3	2
A	84	Hypertension without mention of heart	444-447	1													1							
A	85	Diseases of arteries	450-456	5												1	1		1		2			
A	86	Other diseases of circulatory system...	460-468	1																			1	
A	90	Bronchopneumonia	491	9																1	2		3	3
A	91	Primary atypical, other and unspecified pneumonia	492-493	1																				1
A	93	Bronchitis, chronic and unqualified ...	501-502	1																				1
A	97	All other respiratory diseases	511-517 520 522-527	5																	1		3	1
A	99	Ulcer of stomach	540	2															1					1
A	103	Intestinal obstruction and hernia	560-561 570	3																		3		
A	104	Gastro-enteritis and colitis, except diarrhoea of the newborn	571-572	1	1																			
A	105	Cirrhosis of liver	581	3													2		1					
A	106	Cholelithiasis and cholecystitis	584-585	1																1				
A	109	Chronic, other and unspecified nephritis	591-594	2															1			1		
A	112	Hyperplasia of prostate	610	2															1				1	
A	114	Other diseases of genito-urinary system	601-603 605-609 611-617 622-637	1														1						
A	116	Toxaemias of pregnancy and the puerperium	642, 652 685-686 700-716	1										1										
A	126	All other diseases of skin and musculoskeletal system	731-736 738-744	1															1					
A	130	Birth injuries	760-761	1	1																			
A	132	Infections of the newborn	763-768	2		2																		
A	135	Ill-defined diseases peculiar to early infancy, and immaturity unqualified .	773-776	1	1																			
A	136	Senility without mention of psychosis	794	12																		1	3	8
AN	138	Fracture of skull	N800-N804	2										1			1							
AN	143	Head injury (excluding fracture) ...	N850-N856	1						1														
AN	150	All other and unspecified effects of external causes	N950-N959 N980-N999	1										1										
		Totals		194	3	2	—	2	1	—	—	—	1	2	1	2	11	6	20	12	32	22	27	50

CARE OF THE SICK AND AGED

Provisions for the institutional care of aged or infirm persons remain the same as have been described in my previous Annual Reports.

Two hostels, one at Beriro's Home and the other at Little Sisters of the Poor maintained by the Colonial Government and administered by the Department of Labour and Social Security, can accommodate a total of seventy persons. A small number of aged and infirm women are also looked after at the Colonial Hospital. Though the old people domiciled in the hostels are adequately cared for and provided with all the comforts and amenities possible under the circumstances, the structural features of one and the environmental conditions in the other render it difficult to implement modern conceptions regarding the care of the aged and infirm.

It is the fate of man if he survives to play his part in the world's stage until the "sixth age" to shift

> "Into the lean and slipper'd pantaloon,
> With spectacles on nose and pouch on side,
> His youthful hose well sav'd, a world too wide
> For his shrunk shank; and his big manly voice,
> Turning again toward childish treble, pipes
> And whistles in his sound."

And if his part in the last act be long, maybe to make his exit in

> "Second childishness and mere oblivion;
> Sans teeth, sans eyes, sans taste, sans everything."

(As You Like It. Act II, Scene VII).

Though this curious, insidious but inexorably progressive disintegration so aptly described by The Poet which we call ageing is inevitable, much can be done by appropriate care and encouragement, and by relieving the many mental and physical disabilities inherent to the process to mitigate or retard its ravages and to keep old folk mentally alert, physically active and able to enjoy life as long as possible. Many a bedridden wreck of humanity could have been prevented from becoming so by timely treatment, and others who are bedridden can at times be rehabilitated to a degree when they are no longer a burden to themselves and to others. Such are the aims of the modern medico-social science of geriatrics, and it is to be hoped that in the not too distant future properly appointed homes for the aged and infirm associated with a geriatric clinic will be provided in Gibraltar.

CHILDREN DEVOID OF PARENTAL CARE

There are no provisions in Gibraltar for the institutional care of children who because they are orphans or for other reasons are deprived of parental care. Though it is preferable and to their advantage that such children be brought up under domestic conditions as members of a family who are anxious and in a position to adopt them or who are otherwise prepared to assume responsibility for their care and welfare, it is not always easy to find satisfactory homes, and much care is required in selecting them and supervising the children's living conditions and progress, besides, whatever is done on these lines there will always remain a number, however small, who would be best in an institution. Admittedly the maintenance of a home for a small number may be uneconomical, but it could also be used for the temporary housing and care of children during a period of incapacity on the part of the mother because of illness or a confinement. It is not so uncommon for a mother to neglect herself and delay seeking medical advice until she is virtually unable to stand because she cannot provide for the care of her children in the event of her being ordered to bed or admitted to hospital. Generally relatives and neighbours are anxious and willing to help, but they are not always in a position to spare the time and give the attention necessary, and in the absence of an organized home help service, the provision of a small home to serve the dual purpose would appear to me to merit serious consideration.

CARE OF THE BLIND

I am indebted to the Honorary Secretary of the Gibraltar Society for the Prevention of Blindness, Mrs. D. M. Ellicott, for the information about the work of the Society during the year 1956 on which this section is based.

The number of blind persons in Gibraltar remained almost stationary during 1956. Eight blind persons died, six new registrations were made, and a blind child arrived from England.

During the year the Government Ophthalmologist classified the blind into grades in accordance with the practice in England, with the following result :—

Blind, Class	I (Below 3/60 Snellen)	38
,, ,,	II (Below 6/60 Snellen)	5
,, ,,	III (6/60 or above Snellen)	5
Partially sighted		13
		111

Only three of the blind are under the age of 20, and six blind and two partially sighted persons are between the ages of 20 and 40.

Those now graded as Partially Sighted have been allowed to remain on the register, in order not to deprive them of the privileges they have long enjoyed.

Early in the year a serious attempt was made by the Society to get the younger blind to accept tuition, but without success. One man under 40 and another over that age agreed to take lessons in Spain, if conveyed by car, but when similar tuition and transport were offered in Gibraltar they declined to attend, from which it would appear that they were only interested in the outing.

The most important event during the year was the visit in December of Mr. John Wilson, O.B.E., Director of the British Empire Society for the Blind, who while in Gibraltar attended a Christmas party where he talked to some of the younger blind and tried to persuade a boy of 18 to go to England. He promised him a first class education, but the youth flatly refused to leave home, and appears quite willing to be kept all his life by his relatives, a poor working class family. Several of the younger blind were anxious to learn to make things in their own homes, and Mr. Wilson hopes to be able to find a home teacher to come to Gibraltar for six months. The expenses will be divided between the Gibraltar Society, the British Empire Society for the Blind, and the local Department of Labour and Social Security, which is most anxious to help the blind to become self-supporting.

Eleven children whose sight would suffer under a normal curriculum receive special tuition at St. David's School. The sight of eight children has been so improved as to enable them to leave the school, one went to England and one is now over school agent. Ten other children left the school or have never attended, because their parents allege that the School is too far from their homes, though free bus tickets to and from school are given to the children, but not for an adult escort. The Society's visitors are now visiting the homes of these absentees, to try to persuade the parents to change their attitude.

Gibraltar bus companies have always been most generous in providing free transport for blind persons with one companion, but because some were allowing sighted persons to use their cards, one of the biggest of these concerns contemplated withdrawing the privilege. On representations by the Society, however, they continued to grant transport gratis on condition

that a photograph of the owner is affixed to each card, but restricted the privilege of a free travelling companion to the blind in Class I.

A very successful Flag Day realized £382, and financial help was given by the Gavino's Board of Trustees to four blind persons recommended by the Society.

Free wireless licences had previously only been given to blind persons who owned a wireless set. Now, at the request of the Society, Government has agreed to grant free licences to all families in the lower income groups where there is a blind person. Practically all the blind have wireless sets in their homes, and the Society pays for the repair of any set for which a free licence has been issued.

The Society suffered a grievous loss at the beginning of the year by the death of the Rt. Rev. Dr. R. J. FitzGerald, C.B.E., Roman Catholic Bishop of Gibraltar, a founder member and for many years its Chairman. His successor, the Rt. Rev. Dr. John Farmer Healy, has been elected to the Chair.

There is hardly need for me to stress the valuable work which, notwithstanding many difficulties and frustrations, this voluntary organization is carrying out for the prevention of blindness and the care of the blind.

PREVALENCE & CONTROL OF INFECTIOUS DISEASES

The infectious diseases statutorily notifiable under the provisions of the Public Health Ordinance in Gibraltar are: Smallpox, Cholera, Epidemic Typhus, Plague, Yellow Fever, Relapsing Fever, Dysentery, Diphtheria, Cerebro-Spinal Meningitis, Scarlatina or Scarlet Fever, Typhoid or Enteric Fever, Undulant Fever, Acute Encephalitis, Acute Poliomyelitis, Chicken Pox, Epidemic Parotitis, Erysipelas, Leprosy, Measles, Meningococcal Infection, Ophthalmia Neonatorum, Paratyphoid Fever, Pertussis, Puerperal Fever, Rubella, Trachoma, Tuberculosis (all forms), Venereal disease.

Eight hundred and twenty-eight cases of infectious diseases were notified from the civil population during the year which represents an incidence of 35.3 per thousand, and amounts to an increase of 473 compared with the preceding year, when the corresponding figures were 355 and 15.3. It also constitutes the highest incidence since 1951 when 836 notifications were received. The increase was due mainly to a widespread epidemic of Measles which starting in November 1955 spread rapidly and continued unabated until April of the year under review contributing 443 notifications, and to minor epidemics of Chicken Pox and Scarlet Fever which provided 134 and 96 cases respectively. Thus these diseases accounted for 673 or 81 per cent of all notifications.

Six cases of Diphtheria were notified, but the disease was only confirmed in four. A single notification was received in 1955.

One case of Paralytic Poliomyelitis and one of Polio Encephalitis were notified in July.

Only two deaths from infectious diseases were reported. One was attributed to Pulmonary Tuberculosis, the other to Tuberculous Meningitis.

The following tables show the incidence of infectious diseases for the decades 1930-9 and 1945-54.

1930-9

1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	Average
393	302	1,144	290	394	241	177	419	856	93	430,9

1945-54

1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	Average
102	103	168	252	181	225	836	462	552	311	319.2

1955 = 355
1956 = 828

Note: Two hundred and fourteen cases of infectious diseases which were notified from families of service personnel and casual visitors or who were brought into town for treatment are not included in the data recorded above.

Notifications received from all civilian sources therefore totalled 1,042 which represents a crude incidence of 41.5 per thousand total population. The corresponding figures for 1955 were 455 and 18.3.

Pulmonary Tuberculosis

Fifteen cases of Pulmonary Tuberculosis were notified from the civil population during the year. There was only one death, a female aged 63 years who died unnotified and is not included in the tables of notifications.

The true incidence was therefore sixteen cases. These figures represent a decrease of four cases and one death compared with the previous year when twenty cases and two deaths were reported.

The incidence and mortality rates were 0.68 and 0.04 per thousand population respectively. The corresponding rates for 1955 were 0.86 and 0.08. The incidence is the lowest since the repatriation of the population in 1945, whilst the mortality is lower than in 1955 which, as reported in the Annual Health Report for that year, was the lowest recorded in Gibraltar since 1891 when records are first available.

The incidence and mortality table in page 28 shows that except for occasional fluctuations, there has been a steady decline in the morbidity and particularly in the mortality from this disease during the past decennium, which though not a justification for complacency can be considered to augur well for the future.

There was a marked predominance of males over females (twelve to four) principally in the 55 to 65 year group which

provided seven males and one female. The other persons affected included a male and a female aged 13 and 7 years respectively, a male aged 21 and three males and two females between 25 and 44 years of age.

The male aged 21 was probably infected by a brother, and a woman aged 25 may have acquired the disease from her son.

The facilities for the free radiological examination of prospective employees on application to the Director of Labour and Social Security which were first provided in 1952 continued to be available throughout the year, but the response has again been disappointing.

The purpose of this arrangement is principally to protect children from being infected by nurse-maids and other servants who normally are in intimate contact with them, and who unaware of it may be suffering from Tuberculosis in an active infectious stage. Parents and guardians cannot be too strongly urged to avail themselves of the facilities offered to safeguard their children.

Details of radiological screenings of domestic servants for the years 1952-6 are shown in the following table which has been kindly supplied by the Director of Labour and Social Security.

Radiological Screening of Domestic Servants Period 1952-56

	1952	1953	1954	1955	1956
New entrants to domestic service in Gibraltar	21	110	26	2	4
Domestic servants transferring from one employer to another	129	223	99	113	60
Domestic servants already in employment screened at employer's request	7	54	78	48	40
Total number screened	157	387	203	163	104
Number found unfit	Nil	3	1	Nil	Nil

Note : Six cases of Pulmonary Tuberculosis which were notified from sections of the population with which these statistics are not concerned, are not included in the above data.

Incidence and Mortality from Pulmonary Tuberculosis 1935-1939 and 1945-1956

YEAR	Cases	Deaths	Incidence per Thousand	Deaths per thousand	
1935	23	15	—	0.88	
†1936	30	19	1.90	1.20†	(T.B. Officer appointed)
1937	34	21	1.74	1.08	
1938	8	16	0.39	0.79	
1939	16	14	0.8	—	
	Civil population evacuated during the war				
1945	42	7	2.4	0.4	
1946	30	6	1.55	0.31	
1947	31	7	1.52	0.34	
1948	17	12	0.72	0.51	
1949	22	8	0.89	0.32	
1950	19	6	0.76	0.24	
1951	22	6	1.04	0.28	
1952	28	4	1.26	0.18	
1953	23	7	0.92	0.28	
1954	25	10	1.08	0.43	
1955	20	2	0.86	0.08	
1956	16	1	0.68	0.04	

Non-Respiratory Tuberculosis

Six notifications of non-respiratory Tuberculosis involving one death were received during the year.

The organs affected and the sex and ages of the persons concerned were as follows:—

Peritoneum	—	Female	aged 20	years
Spine	—	Male	„ 8	„
Kidney	—	Male	„ 55	„
Glands of neck	—	Male	„ 3	„
Meninges	—	Female	„ 3	„
Knee Joint	—	Female	„ 55	„

The disease proved fatal in the child affected with Tuberculous Meningitis. She was probably infected by her mother who had been recently admitted to hospital suffering from Pulmonary Tuberculosis.

These cases represent an incidence and mortality rate of 0.25 and 0.04 per thousand population.

Non-respiratory types of tuberculosis are comparatively uncommon in Gibraltar, particularly so affections of the skin which including lupus vulgaris are seldom seen. The incidence for 1956 may therefore be considered to have been unusually high.

Measles

The sudden increase in the prevalence of Measles during the months of November and December, 1955 which was recorded in my annual report for that year developed into a widespread epidemic which continued unabated until June of the year under review. Four hundred and forty-three cases were notified from the civil population. February showed the highest incidence, two hundred and seven cases. These together with one hundred and thirty-one notifications of cases which occurred in services' families amounted to a total of five hundred and seventy-four.

The disease was generally benign and no fatalities were reported. There are sound reasons to consider that these figures under-estimate the true incidence of the disease, since a number of mild cases were discovered which had not been attended by doctors and remained unnotified.

The following table shows the incidence of Measles in the civilian population during the period 1945-56:—

1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
12	3	61	135	20	20	692	3	100	127	50	443

German Measles

Forty-seven cases were notified during the year.

Scarlet Fever

The incidence of Scarlet Fever which is normally low in Gibraltar assumed epidemic proportions in 1956. Ninety-six notifications were received from the civil population which together with twenty-six cases notified from services' families provided a total of one hundred and twenty-two cases. There were no deaths.

The first cases were reported early in January, the patients concerned being four infants from two naval families living in a large block of flats occupied exclusively by naval personnel and their families. Thence the disease spread slowly to involve

other districts in the City and reach a peak incidence of fourteen cases in March. This was followed by a rapid fall in April and the incidence remained low until September when it reached its lowest level. The number of cases again increased during October, and in November the incidence rose sharply to attain the highest peak of the outbreak in December, when twenty-six cases occurred.

The disease was most prevalent amongst infants and school children, but a considerable number of young subjects between 15 and 25 years of age were also affected. There was no significant difference in the attack rate between the sexes.

By far the greater number of cases were reported from the central district which is the most densely populated. The south district was affected to a much lesser extent, whilst the marked discrepancy between the figures for these two districts and the north district suggest that a considerable number of cases in the latter escaped notification.

Multiple infections occurred in twenty-one families. Two cases in each of sixteen homes and three in five others, which represents 38.5 per cent of the total number of cases.

The extent to which attendance at school may have contributed towards the spread of the disease is not clear. Though the first wave which produced a peak incidence in March coincided with the opening of the schools in January and the second which attained the highest peak of the outbreak in December followed soon after the re-opening of the schools for the Autumn Term in September, it is difficult to explain the fall which occurred in April and the comparative lull which ensued and lasted until September, notwithstanding that the schools were open from April till the beginning of the summer vacation in July, a period of approximately three months. It may be that the climatic conditions during that period were unfavourable to the spread of the infecting organism or in some way affected the parasite host balance, and the infection just smouldered until the onset of more favourable cooler autumnal weather. I would add that the exclusion of patients and familial children contacts from school which was enforced would, as far as it is possible, to judge, appear to have had little influence in stemming the outbreak.

The amount of fresh milk consumed by the population is insignificant. The little that is imported comes from Spain, is boiled in compliance with the Milk and Dairies Bye-laws before it is distributed to the public and invariably boiled again by the consumer before drinking. With the exception

of a negligible number who drank fresh milk, sterilized condensed tinned products were used by the persons affected. These circumstances and the lack of the explosive features characteristic of a milk borne outbreak were considered to exonerate milk as the cause of the outbreak, in fact, all the evidence available indicated that spread was by direct contact with affected persons or carriers which was favoured by the overcrowded living conditions prevalent in the Colony.

So far as I was able to ascertain from conversations with medical practitioners the disease was almost invariably benign and complications or sequelae seldom occurred. In a large majority of cases the symptoms were so mild and transient, the rashes so atypical and fugitive, and recovery so rapid and often unattended by desquamation as to render diagnosis uncertain.

It is a matter for conjecture whether the atypical course and rashes may have to some extent been due to administration of penicillin on the first appearance of a tonsillitis with pyrexia or essentially to the nature of the causative organism, but it is significant that attempts to isolate haemolytic streptococci from a number of these cases were not always successful, whilst per contra these organisms were being frequently isolated from swabs sent to the Laboratories for investigations unrelated to the disease in question.

Prevalence of pyrexial sore throats of varying severity, German Measles and cases of infectious mononucleosis tended to further confuse diagnosis. In this respect the incubation periods in a number of instances where several cases occurred in the same household rendered the diagnosis of Scarlet Fever doubtful, and consideration of all the relevant data would appear to indicate that though undoubtedly there has been an abnormally high prevalence of infections by haemolytic streptococci during the year, the incidence of true Scarlet Fever is probably exaggerated by the number of notifications.

The great majority of patients were isolated and treated in their homes where the customary precautions to prevent spread were adopted. Only an insignificant number were admitted to hospital.

Though affections caused by haemolytic streptococci are by no means uncommon, Scarlet Fever is a comparatively rare disease in Gibraltar. With the exception of a severe outbreak which occurred between the months of February and November in 1923 during which two hundred and eighteen cases involving five deaths were recorded, there are no records of the disease having manifested itself in epidemic form in the past

sixty-five years, and it can only be presumed that the outbreak under review may have been caused by the introduction of an erythrogenic type of streptococcus of apparently low virulence into a child population living under overcrowded conditions and lacking the protection acquired through frequent exposure to such infections. Scarlet Fever is reputed to be relatively uncommon in the warm sunny climates of Southern Europe and it is also possible that the abnormally cool climatic conditions which prevailed throughout the year in this Colony may have favoured the spread of the organism.

The following tables show the incidence of Scarlet Fever in Gibraltar during the periods 1930-9 and 1946-55, and a graph based on the reported dates of onset of cases shows the course of the 1956 epidemic.

Incidence of Scarlet Fever for the decades 1930-9 and 1946-55

1930-9

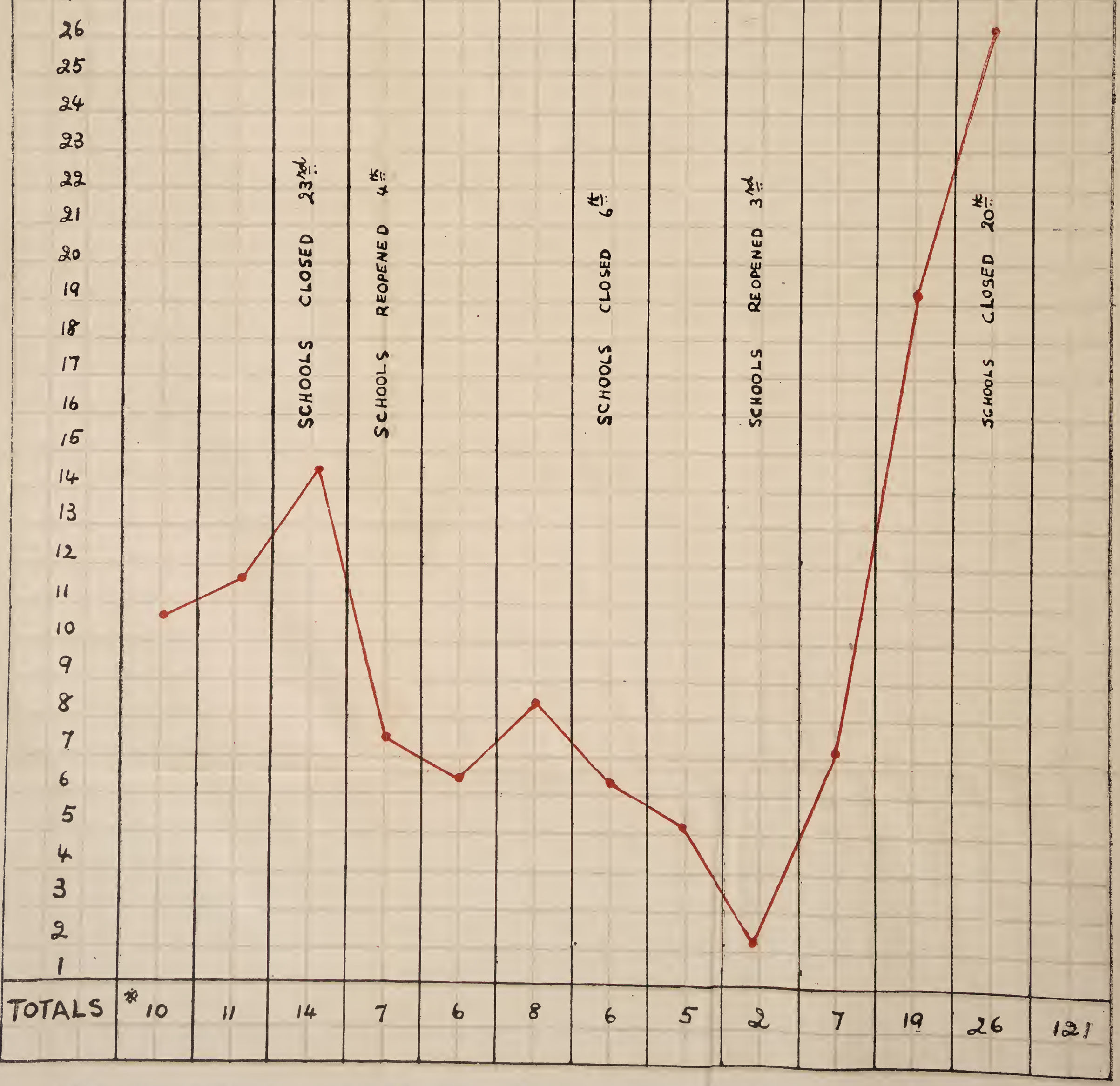
Year ...	1930	1931	1932	1933	1934	1935	1936	1937	1938	1939	Average
Cases ...	10	11	12	17	17	24	31	10	20	5	15,7

1946-55

Year ...	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	Average
Cases ...	4	3	3	3	2	37	5	16	20	13	10,6

COURSE OF 1956 EPIDEMIC BASED ON DATES OF ONSET OF CASES

CASES	MONTH OF ONSET												
	JAN.	FEB.	MAR.	APR.	MAY.	JUNE	JULY.	AUG.	SEPT.	OCT.	NOV.	DEC.	
TOTALS	*10	11	14	7	6	8	6	5	2	7	19	26	121



*ONE CASE NOTIFIED IN JANUARY WITH DATE OF ONSET IN DECEMBER 1955 IS NOT INCLUDED.

INCLUDES CASES FROM SERVICES FAMILIES.

Chicken Pox

An outbreak of Chicken Pox which starting in January prevailed until August produced one hundred and thirty-four notifications from the civil population. Thirty-seven cases were also notified from other sources amounting to a total of one hundred and seventy-one.

Pertussis

There was a minor recrudescence from January to July, 1956 of the epidemic of Whooping Cough recorded in my Annual Report for 1955 and which had shown signs of abating during the last quarter of that year. Sixty cases were notified. The disease continued generally benign and no deaths occurred.

Enteric Fever

A single case of Typhoid Fever was notified from the civil population during the year. The patient frequently had meals in Spain and probably acquired the infection there. No cases of Para-Typhoid fever were reported. This is the lowest incidence for Enteric Fever recorded since 1945.

Three imported cases of Typhoid Fever were admitted to the Colonial Hospital for treatment.

Dysentery

Eleven cases of Bacillary Dysentery were notified during the year. None were reported in 1955. The apparent increase is not statistically significant because as I have pointed out in previous Annual Reports there are sound reasons to believe that the number of notifications do not represent the true incidence of the disease.

Shigella Flexneri "W" was isolated from eight cases which included three adults and two infants all members of one family living in the same house. S. Sonnei was isolated from two young children, a brother and sister, and S. Flexneri 103 from the remaining case.

No cases of Amoebic Dysentery were notified from the Town or imported from the Bay.

Diphtheria

Six cases of Diphtheria were notified. There were no deaths. Two were not confirmed bacteriologically. Pure cultures of B. Friedländer were grown from throat swabs in one case and of B. Xerosis in the other.

Two of the patients were young infants aged one year and five months and three years respectively who were members of a large family living in an overcrowded house in poor sanitary surroundings. Neither had been immunized. C. Diphtheriae, Intermedius type, was isolated in both cases and the disease was severe requiring tracheotomy in the older infant. Exhaustive investigations including bacteriological examination of swabs taken from all the familial and other contacts failed to reveal a carrier.

One of the persons affected was a female aged 30 years.

Due publicity was given to the occurrence of the severe cases which produced urgent demands from many parents for immunization of their children but unfortunately they were soon forgotten, and the enthusiasm for prevention waned in a few weeks.

The following table shows the incidence and deaths from Diphtheria during the period 1945-56.

Year	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Cases	7	11	12	8	0	4	5	6	9	1	1	6
Deaths	0	1	0	1	0	0	0	0	0	0	0	0

Acute Poliomyelitis and Acute Encephalitis

A single case of paralytic poliomyelitis was notified in July which merits a brief comment. The patient was one of three male children, cousins, whose ages ranged between 5 and 6 years, and who though living apart were close friends and frequently played together. The three fell ill about the same time, one with vague symptoms including headache and pyrexia, which cleared up rapidly without any sequelae, the other was admitted to hospital and notified as acute encephalitis, and it was only when the third developed a mild but typical attack of paralytic poliomyelitis that the close association between the three cases came to light. The circumstances suggest that these children may have been infected at the same time from a common source with a polio virus which caused an indefinite transitory illness in one, a typical paralysis in another, and an encephalitis in the third. Unfortunately no means for virological investigations were available.

The source of infection remained untraced. The children were said to have been together on board a vessel where they were entertained and given refreshments by members of the

crew two days before the onset of the symptoms, and it was suggested that they may have acquired the disease on that occasion, but the incubation period is unduly short and there was no history of any illness having occurred on board the vessel to render it suspect. With the exception of a mild paralytic case which was notified from a service family late in November, no other cases occurred during the year. This child had never been even remotely associated with the other children.

Meningococcal Meningitis

Two sporadic cases were notified.

Undulant Fever

Two notifications of infections by Brucella Melitensis were received.

Smallpox

No cases of Smallpox occurred in Gibraltar nor were any landed from the Bay during 1956.

Vaccinations

Number of children born	399*
Number who died before vaccination	3
Number who left Gibraltar before vaccination	8
Number certified as insusceptible to vaccination ...	1
Vaccination postponed on medical grounds	8
Number successfully vaccinated (children born in 1956) ...	272
Objectors to vaccination	NIL
Outstanding	107

(*includes 16 non-residents).

In addition eight children from Service families and one hundred and fourteen children who for various reasons had not been vaccinated or whose vaccination had been postponed on account of illness were also vaccinated.

Thus three hundred and ninety-four children were vaccinated which together with two hundred and fourteen re-vaccinations performed on children who had attained the age of twelve years and sixty-four on other persons for purposes concerning the International Sanitary Regulations constitute a total of six hundred and seventy-two vaccinations carried out during the year. Of these, six hundred and thirty-one were performed by the Public Vaccinator.

There have been no objectors to vaccination. Of the one hundred and seven outstanding, eighty-eight had not attained the age of three months, and notices were served on the remaining nineteen.

Rabies

A case of Rabies in a dog occurred in December, 1956 following a period of complete freedom from the disease of approximately two years.

The animal a well-kept duly licensed mongrel showed clinical signs of Rabies which was confirmed by the finding of Negri bodies in the brain and by animal inoculations at the Pasteur. Institute at Tangiers. The virus was reported to be of a highly virulent strain—"virus renforcé."

One person who had been bitten underwent anti-rabic treatment and two dogs which were known to have been in close contact with the rabid animal were painlessly destroyed. The owners of others in the district were warned of the danger and directed to keep their dogs under control or effectively muzzled, and the public were warned by the Sanitary Inspectorate, the police and through the press of the danger.

I have repeatedly in my Annual Reports and on other occasions expressed my concern at the occurrence of these sporadic cases of Rabies in Gibraltar whose source of infection cannot be traced, and I cannot fail to do so again.

There are no grounds to suspect even remotely the existence of wild animal reservoirs of the virus on the Rock, in fact the long periods of freedom from Rabies shown in the table below virtually exclude such a possibility. The Colony should therefore enjoy complete freedom from this disease, and the occurrence of these sporadic cases can only be explained either by the deliberate clandestine introduction of an animal which having been infected outside the territory is incubating the disease, or by a rabid dog from Spain crossing the frontier undetected. The latter alternative is a possibility, but the former I am convinced occurs with greater frequency than is generally believed.

There have occurred in the past two serious widespread outbreaks of Rabies in Gibraltar, and on both occasions it was only after many months of trying work, and grave danger of infection to the personnel engaged in abating them as well as to the public that the town was cleared of the disease. The danger of a similar outbreak occurring again is very real particularly in view of the numberless dogs kept in our City, often unlicensed, many of which can be frequently seen unmuzzled

and uncontrolled parading the streets and constituting a veritable menace to the public, and particularly to children who are the most frequent victims.

The position should provide food for thought even to the most irresponsible, or is it that nothing short of the death of a human being from hydrophobia will awaken the conscience of some who through ignorance, but more likely through pure selfishness, endanger the lives of their fellows to satisfy their own caprices.

These may appear hard words but the circumstances warrant them, whilst the occurrence of a second case of Rabies in a so-called "stray" dog which bit five children early in January of the current year about three weeks after the incident in question renders them all the more justified and pertinent.

Incidence of Rabies in Gibraltar during the period 1945-56

Year	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954	1955	1956
Dogs	1	1	0	0	1	1	0	0	0	1	0	1
Cats	0	0	0	0	0	1	0	0	0	0	0	0

The arrangement made in 1955 with the Gibraltar Branch of the Royal Society for the Prevention of Cruelty to Animals whereby the Society in consideration of a grant from the Council undertook to maintain control over the cat population by their Inspector throughout the year continued during 1956.

A total of 718 stray, unwanted or seriously injured cats and 50 unwanted or seriously injured dogs were humanely destroyed by the Society's Inspector during the year.

I am indebted to the Commissioner of Police who is in charge of the Government Quarantine Kennels, where dogs and cats are detained under observation and humanely destroyed if unclaimed, for the following information about the work done there during the year.

Number of stray dogs admitted	55
Number of stray dog claimed by owners	12
Number of stray dogs destroyed	43
Number of dogs detained after biting persons	17
Number of dogs claimed by owners	11
Number of dogs destroyed	6
Number of dogs detained in transit	131
Number of dogs detained in Quarantine	2

Number of dogs humanely destroyed at owner's request	25
Number of stray cats admitted	29
Number of stray cats claimed by owners	—
Nuumber of stray cats destroyed	29
Number of cats detained after scratching/biting	2
Number of cats claimed by owners	—
Number of cats destroyed	2
Number of cats detained in transit	4
Number of cats humanely destroyed	22

Influenza

Influenza is not notifiable in Gibraltar, but information furnished by medical practitioners and data obtained from records of sickness amongst the Council' employees indicate that the disease was unusually prevalent during January and February.

Notifications of Infectious Diseases with Age and Sex Incidence — Civil Population 1956

Notifiable Diseases	NUMBER OF CASES														Districts			No. of cases removed to Hospital
	All Ages	Under 1 year		1 and under 5 years		5 and under 15 years		15 and under 25 years		25 and under 45 years		45 and under 65 years		65 and over		North	Central	South	
		M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.				
Measles	443	6	4	95	69	119	125	13	8	1	2	—	1	—	—	12	261	170	8
Rubella	47	2	—	13	6	11	8	2	2	1	2	—	—	—	—	—	33	14	-
Scarlet Fever	96	—	1	7	6	24	29	11	12	3	2	1	—	—	—	3	70	23	1
Pulmonary Tuberculosis	15	—	—	—	—	1	1	1	—	3	2	7	—	—	—	2	10	3	14
Non-Respiratory Tuberculosis	6	—	—	1	1	1	—	—	1	—	—	1	1	—	—	1	5	—	4
Chicken Pox	134	1	3	10	11	63	38	2	2	4	—	—	—	—	—	2	88	44	—
Pertussis	60	4	3	19	19	9	4	2	—	—	—	—	—	—	—	15	23	22	6
Mumps	2	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	1	1	—
Meningococcal Meningitis	2	—	—	2	—	—	--	—	—	—	—	—	—	—	—	—	—	2	1
Dysentery	11	—	—	1	3	—	1	2	1	2	1	—	—	—	—	—	9	2	1
Enteric Fever	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	1
Undulant Fever	2	—	—	—	—	—	--	—	—	1	1	—	—	—	—	—	1	1	—
Diphtheria	6	—	—	—	2	3	—	—	—	—	1	—	—	—	—	3	3	—	5
Acute Poliomyelitis	1	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	—
Acute Encephalitis	1	—	—	—	—	1	—	—	--	—	—	—	—	—	—	—	1	—	—
Erysipelas	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	—	—
Totals	828	13	11	148	118	234	206	33	27	15	11	9	2	1	—	39	507	282	41

Infectious Diseases — Monthly and Quarterly Incidence — Civil Population 1956

Disease	January	February	March	1st Qr.	April	May	June	2nd Qr.	July	August	Sept.	3rd Qr.	October	November	December	4th Qr.	Total	Deaths
Measles	94	207	100	401	29	2	4	35	3	1	—	4	3	—	—	3	443	—
Rubella	1	2	13	16	10	3	5	18	—	1	1	2	—	7	4	11	47	—
Scarlet Fever	4	7	8	19	8	6	8	22	6	3	3	12	7	10	26	43	96	—
Pulmonary Tuberculosis	1	1	1	3	2	2	2	6	1	2	2	5	—	1	—	1	15	1
Non-Respiratory Tuberculosis.	—	—	1	1	—	1	—	1	—	3	—	3	1	—	—	1	6	1
Chicken Pox	22	21	20	63	17	8	25	50	18	2	—	20	—	—	1	1	134	—
Pertussis	2	3	15	20	13	12	5	30	3	—	—	3	2	3	2	7	60	—
Mumps	—	1	1	2	—	—	—	—	—	—	—	—	—	—	—	—	2	—
Meningococcal Meningitis	—	1	—	1	—	—	—	—	1	—	—	1	—	—	—	—	2	—
Dysentery	—	—	1	1	—	—	—	—	—	—	7	7	1	2	—	3	11	—
Enteric Fever	—	—	—	—	1	—	—	1	—	—	—	—	—	—	—	—	1	—
Undulant Fever	—	—	—	—	1	1	—	2	—	—	—	—	—	—	—	—	2	—
Diphtheria	—	—	—	—	—	—	1	1	1	3	1	5	—	—	—	—	6	—
Acute Poliomyelitis	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	1	—
Acute Encephalitis	—	—	—	—	—	—	—	—	1	—	—	1	—	—	—	—	1	—
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	1	—
TOTALS	124	243	160	527	81	35	50	166	35	15	14	64	14	24	33	71	828	2

Infectious Diseases — Monthly and Quarterly Return of Cases Landed from the Bay or Brought into Town for Treatment, 1956

Disease	January	February	March	1st Qr.	April	May	June	2nd Qr.	July	August	Sept.	3rd Qr.	October	November	December	4th Qr.	Total	Deaths
Scarlet Fever	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1	—
Pulmonary Tuberculosis	—	1	1	2	—	—	—	—	—	—	—	—	—	1	—	1	3	3
Non-Respiratory Tuberculosis	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—
Chicken Pox	—	—	—	—	1	—	1	2	1	—	—	1	—	—	—	—	3	—
Pertussis	—	1	—	1	—	1	—	1	—	—	—	—	—	—	—	—	2	—
Mumps	—	—	—	—	—	—	1	1	2	1	—	3	—	—	—	—	4	—
Enteric Fever	—	—	—	—	—	—	—	—	—	2	—	2	—	1	—	1	3	—
Totals ...	1	2	1	4	1	1	2	4	3	3	—	6	1	2	—	3	17	3

INVESTIGATION AND PREVENTION OF OTHER DISEASES

INSECT VECTORS

Flies

With the exception of an unprecedented invasion by a species of Drosophila or Fruit Flies in the month of November which constituted a nuisance for about six weeks, flies did not prove troublesome during 1956. The source of the infestation was not established beyond doubt, but it is probable that these insects were introduced in certain congsignments of potatoes which were found rotting and heavily infested.

The routine measures for the control of flies were intensified in Spring and throughout the hot season, pamphlets were distributed to all householders and food caterers were advised on the most appropriate measures to safeguard foods from contamination by these insects.

Eight hundred and sixty-seven gallons of a five per cent solution of D D T prepared in the Public Health Department for use in sprayers were sold to the public.

Mosquitoes

Owing to the mildness of the weather, mosquitoes were prevalent not only during Spring and Summer as usual, but they continued to cause nuisances till late December. The North and South Districts and to a lesser extent the upper parts of the Town were mainly affected. Out of one hundred and twenty-one breeding places which were destroyed, no less than ninety-five were found in the North and South Districts.

All mosquito control measures were carried out in close co-ordination with the Services sanitarians by the regular staff of the Public Health Department without the employment of extra personnel.

Seventy-five specimens were taken for identification, the following species being found :—

Culex pipiens	47	(between March and December).
Theobaldia longiareolata ...	28	(between May and December).
Aëdes argenteus	Nil.	

Notwithstanding careful searches for breeding places in and near domestic dwellings known to be favoured by the Aëdes argenteus, no insect of this species has been identified for the past six years, and it may be that the gradual substitution of the traditional "tinaja" (large earthenware vessel used for storing household potable water) by piped water supplies, the elimination of wooden washing tubs, and the use of D D T sprays is causing the extinction of this insect. This is of considerable practical importance as the Aëdes argenteus is a vector of Yellow Fever, widespread epidemics of which have on two occasions in the past occurred in Gibraltar with a very high mortality.

In the course of 24,246 inspections, one hundred and twenty-one breeding places were found and destroyed as follows :—

Tubs	11
Barrels	29
Miscellaneous	81

MOSQUITO CAMPAIGN 1956

Months	Visits paid to Premises	Breeding Places Found—by Districts					Totals
		Town Lower	Town Middle	Town Upper	South	North	
January	1,715	—	—	—	—	1	1
February	1,714	—	—	—	—	—	—
March	2,083	—	—	—	1	—	1
April	1,941	2	—	—	—	1	3
May	2,061	—	—	5	10	7	22
June	2,472	1	2	2	17	11	33
July	1,735	—	—	2	3	6	11
August	1,693	2	—	3	2	10	17
September	2,447	—	—	2	1	5	8
October	1,997	3	—	—	—	3	6
November	1,912	—	—	1	5	—	6
December	2,476	—	—	1	10	2	13
Totals ...	24,246	8	2	16	49	46	121

Breeding places found consisted of:—Washing tubs, drains, drinking troughs, fresh water tanks, flushing tanks, tubs, barrels, pits, earthenware vessels, etc.

RODENT CONTROL

The close co-ordination between the civilian and services staff engaged in the planning and implementing of anti-rodent measures which has proved so advantageous in the past in ensuring maximum efficiency as well as economy in the use of the materials available, was maintained throughout the year.

Arsenic and Zinc Phosphide which experience has proved to be the most effective poisons under local conditions were used in all routine operations, and Warfarin on a few special occasions.

There was a marked preponderance of carcasses of mice recovered which together with the nature of the complaints received suggest that these vermin constitute the major factor in the rodent infestation, and that the rat population is being kept at a satisfactory low level. The discovery however, of several isolated rat breeding places and an increase amounting to approximately fifty per cent in the number of carcasses of these vermin recovered as compared with the previous year, indicate that no relaxation of the anti-rodent measures can be entertained.

Sewers, storm water drains and electricity and telephone pits were disinfested on several occasions with good results.

A total of 50,406 points were prebaited and 21,544 poison baits subsequently laid from which 11,041 takes were recorded, the estimated kill being 2,831.

The carcasses of 104 Rattus rattus and 911 Mus musculus were recovered. The carcasses of seventeen rats which were examined in the City Council Public Health Laboratories were reported to be free from plague bacilli.

Five ships were inspected and Deratting Exemption Certificates issued under the provisions of the International Sanitary Regulations during the year.

The Anti-Rat Co-Ordinating Committee met three times during the year.

RODENT CONTROL—SUMMARY OF TREATMENT BY COMBINED SERVICES DURING THE YEAR 1956

Service	No. of Premises Treated	Prebaits Laid	Poison Baits Laid	Total Takes	Carcasses Found			Estimated Kill
					RR	RN	MM	
Civilian	430	15,986	8,995	5,103	36	—	805	1,268
Military	107	9,455	3,595	1,498	33	—	89	521
H.M. Dockyard...	232	24,509	8,669	4,270	34	—	13	875
R.A.F.	9	200	153	49	—	—	4	13
Electric Light and Telephone Pits	4 manholes	16	16	13	1	—	—	14
Sewers and Drains	60 manholes	240	116	108	—	—	—	140
Totals ...	842	50,406	21,544	11,041	104	—	911	2,831

RODENT CONTROL — SUMMARY OF TREATMENT OF CIVILIAN PREMISES DURING 1956

Campaign Week	Premises Treated	Prebaits Laid	Poison Baits Laid	Total Takes	Carcasses Found			Estimated Kill
					RR	RN	MM	
1/56 to 13/56	102	3,990	2,049	1,259	4	—	167	294
14/56 to 26/56	87	3,229	1,867	1,049	10	—	184	260
27/56 to 39/56	120	4,628	2,676	1,464	9	—	264	383
40/56 to 51/56	121	4,139	2,403	1,331	13	—	190	331
Totals ...	430	15,986	8,995	5,103	36	—	805	1,268

RODENT CONTROL—TREATMENT OF SEWERS, DRAINS, ELECTRIC LIGHT & TELEPHONE PITS DURING THE YEAR 1956

Campaign Week	Date	Manholes Treated	Prebaits Laid	Poison Baits Laid	Total Takes	Carcasses Found			Estimated Kill
						RR	RN	MM	
28/56	9/7/56-13/7/56	10	40	20	20	—	—	—	25
29/56	16/7/56-20/7/56	10	40	20	20	—	—	—	25
30/56	23/7/56-27/7/56	10	40	20	20	—	—	—	25
31/56	30/7/56- 3/8/56	10	40	24	24	—	—	—	35
34/56	20/8/56-24/8/56	10	40	16	8	—	—	—	10
35/56	27/8/56-31/8/56	10	40	16	16	—	—	—	20
42/56	15/10/56-19/10/56	4	16	16	13	1	—	—	14
	Totals ...	64	256	132	121	1	—	—	154

PORT HEALTH WORK

Maritime

The Colonial Government are responsible for the control of the port health work which is carried out by two medical practitioners employed part time as Health Officers, together with a number of Boarding Officers under the administrative direction of the Captain of the Port.

Under the provisions of the Quarantine Ordinance, the Medical Officer of Health is also vested with the status of a Health Officer and is thereby empowered to board ships, examine persons suspected of suffering or who are suffering from infectious diseases, and impose quarantine restrictions if and when necessary.

I am indebted to the Captain of the Port for the following information relating to the work of this Department during 1956.

Number of ships entered during 1956	8,465
Number of ships visited by the Health Officer	215
Number of patients landed,	
from British Ships	71
from Foreign Ships	88

Two of these patients were suffering or suspected to be suffering from infectious diseases.

Air

The Air Port is under the control of the Royal Air Force, and the Senior Medical Officer, who is vested with the status and powers of a Health Officer, is responsible for matters concerning the sanitation of the port and of all service aircraft.

The Colonial Government are responsible for the sanitary control, disinfection and disinsectization of Civil Aircraft. The duties concerned are performed by a Colonial Government Medical Officer as part of his general duties under the administrative direction of the Chief Medical Officer who is also vested with the status and powers of a Health Officer.

SANITARY CIRCUMSTANCES

I am indebted to the City Engineer, Mr. W. E. Chiappe, A.M.I.C.E., A,M.I, Mun, E., for assistance in the preparation of this part of the report.

WATER SUPPLY

Potable Water

The population obtain potable water by two methods (a) from roof catchments and underground tanks attached to each individual house, and (b) from the City Council's supply. The latter is distributed mainly direct by pipes through permanent meters, but a small proportion is drawn by bucket or barrel from the Council's street fountains. The demand for supplies from fountains is decreasing in consequence of the large number of premises which are being provided with direct supplies from the City Council mains. In addition potable water is supplied to private underground tanks during the dry season through temporary meters and flexible hoses and in smaller quantities by tank lorry to those consumers whose premises are not within a reasonable distance from the distributing mains.

All barrels are sterilized at weekly intervals. The public health staff are constantly on the watch for possible pollution of underground tanks. Samples from one hundred and seven suspected tanks were taken in 1956.

The dry season started with reservoirs full to capacity. Over three million gallons were transferred to the brackish water reservoirs direct from the catchments, and about one million gallons had to be run to waste due to lack of storage space. For the same reason pumping from wells had also to be stopped for a few weeks.

In spite of this and of the fact that one evaporator was in operation as often as circumstances permitted, the water position became very serious towards the end of the year due to lack of rainfall. Only 7.85 inches fell from late September to the end of the year as against the average for the period of 15.64 inches. It was found necessary to import water late in December and to restrict supplies generally, particularly to shipping, late in the year. Stocks were below 800,000 gallons just before Christmas.

The Base Exchange Water Softening Plant continued to function throughout the year. The hardness of well water is reduced from approximately thirty-two degrees to zero, then

blended with raw water to the optimum degree of hardness, viz., ten degrees. The blended water after chloranination is pumped into a service tank and then lifted into the Council's reservoirs for distribution to the public, after it has been subjected to a bacteriological examination to establish its purity.

Fifty-nine million gallons were issued during the year from various Council's sources.

Rainfall at the catchments during the calendar year 1956 totalled 34.33 inches.

The supply of boiler water to Shipping from Council's sources at the Watering Jetty was maintained throughout the year.

Brackish Water

Brackish water is supplied by the Council for general sanitary purposes, fire fighting and other requirements.

The quantity of brackish water pumped during the year amounted to some 403,000,000 gallons.

Collection and Disposal of Refuse

Domestic refuse is collected and disposed of daily by the City Council.

In addition to an average of 30 tons of domestic refuse which is collected by the Council's scavenging lorries approximately 6 tons of trade refuse, consisting of tobacco dust, wood shavings, sawdust, waste paper, coffee waste, condemned food and other materials, are carried by private lorries and burnt every day at the Refuse Destructor.

Sewage Disposal

The whole of the sewage of Gibraltar eventually discharges into the sea at Europa Point Outfall.

Numerous storm overflows exist along the line of the main sewer and come into operation during times of heavy floods. The configuration of the Rock is such that very large volumes of storm water rapidly reach the lower levels and the main sewer is then taxed to the utmost. The rate of run-off is such that during heavy rains boulders and much silt reach the sewers.

The new sewer and sewage pumps installed at North Front are working satisfactorily.

The quantity of sewage and storm water pumped from low level during 1956 amounted to approximately 163,200,000 gallons.

Public Highways and Street Cleansing

Full use was made of the new mixing plant installed at Catalan Bay Depot and hot and cold asphalt for resurfacing of roads, reinstatements and other purposes was satisfactorily produced.

Road improvements along certain stretches of Europa Road were completed during the year and further improvements of sections of this road between Engineer Road junction and South Barrack Road were commenced and were well in hand towards the end of the year.

Public highways were maintained in as good a condition as possible, patching and potholing being carried out as and when circumstances permitted. Several carriageways were resurfaced.

Flushing of streets was carried out periodically and intensified during the dry season.

Sweeping of streets was done in the normal way and a high degree of cleanliness was maintained.

Public Baths

The Tarik hot and cold fresh water slipper baths are open the year round and the Sea Bathing Establishment at Montagu continued to be well patronized in summer. Fresh water shower baths introduced a few years ago have become increasingly popular.

Eastern Beach which is much favoured by the residents is controlled by the City Council during the bathing season. A boat patrols the beach throughout the day and two chalets provided with sanitary accommodation are available free of charge to bathers for use as changing rooms. These are kept open until half an hour after sunset.

WORK OF THE SANITARY DEPARTMENT

The summary of work done by the Sanitary Inspectors in 1956 shows a considerable increase in all the spheres of action of the Sanitary Department. Besides four general inspections of premises, sixteen thousand, five hundred and thirteen house-to-house inspections were carried out which represents an increase of over four thousand, two hundred compared with the previous year. They included three hundred and fifty-six made at the request of the Commissioner of Lands and Works for the purpose of reporting on the living conditions of applicants for accommodation in Government owned premises or following complaints made to the Public Health Department by persons living in overcrowded homes, also five hundred and eleven to determine the fitness of premises of applicants to sublet civilian accommodation which were referred to the Department by the Authorities concerned.

In the course of these inspections three thousand, three hundred and ninety-four nuisances were found and abated.

A widespread epidemic of Measles, a minor outbreak of Chicken Pox and an unusually high prevalence of Scarlet Fever made heavy demands on the Inspectors' time. The investigation and control of these and other infectious diseases entailed eight hundred and twenty-nine visits to houses and caused the number of articles disinfected at the Council's Disinfection Station to rise from three thousand and fifty in 1955 to four thousand, one hundred and ninety in the year under review.

A camp which was established in June for the temporary accommodation of certain foreign emigrants in transit through Gibraltar was visited on occasions by the Medical Officer of Health and daily by a Sanitary Inspector to control overcrowding, hygiene and sanitation, and to ascertain the occurrence of any diseases. The emigrants were met as they arrived in parties at the port of disembarkation by the Chief Sanitary Inspector to determine as far as possible their freedom from infectious diseases which entailed invariably one and sometimes two visits a day.

Notwithstanding the pressure of work, food hygiene and sanitation received increased attention. Two thousand, one hundred and forty-five visits were paid to food catering establishments and bakeries, one hundred and twelve to dairies, and two hundred and thirty-eight to mineral water factories.

The corresponding figures for 1955 were one thousand, six hundred and seventy-seven, eighty, and two hundred and forty-eight respectively.

Seventy-two samples of food were taken and analyzed in the City Council Laboratories.

One hundred and fifty-eight samples of water from private underground tanks, from the Council's public fountains and from other sources were also taken and examined bacteriologically. Because evidence of pollution was found in a considerable number of samples of a bottled spring water from a source in the neighbouring Spanish Territory which was being sold in Gibraltar, the importation was prohibited by the Council.

Four hundred and ninety-nine Notices for the abatement of statutory nuisances were served. Legal proceedings were instituted and judgement obtained on eight occasions against house-owners for non-compliance with the requirements of such Notices.

Summary of Work done by the Sanitary Inspectors

Complaints received:

Written	6
Verbal	619

Premises Inspected:

General inspection	4
House-to-house inspection	16,513

Statutory Notices

Served	499

Nuisances Found:

Defective drains	234
Obstructed drains	457
Defective W.Cs.	71
Defective W.C. fittings	559
Defective water fittings	164
Defective rainwater pipes	115
Defective eavesgutters	148
Defective roofs	205
Defective wall plaster	174
Defective floors	35
Defective yard paving	3
Dampness	47
Premises dirty	51
Defective or no dustbin	293
Other minor defects	838
Suspected pollution of water in underground tank	107
Underground tank not insect proof	8
Brackish water tank not insect proof or no cover	5
Brackish water running to waste	242
Street water fittings found defective	83
Premises disinfected for infectious disease	109
Articles disinfected at Disinfecting Station	4,190
Visits of enquiry re Infectious Disease	829
Cases removed in Ambulance:	
Local	210
Bay	58
Samples of food and drugs taken for analysis	72
Samples of water taken for analysis	51
Visits to milk shops	112

Visits to eating houses, bakeries, etc.	2,145
Visits to mineral water factories	238
Visits to barber shops	789
Visits to premises on which notice for abatement of nuisance has been served and are revisited for the purpose of ascertaining if requirements are being complied with	5,081
Vaccination notices served	237
Visits to Emigrants Camp	136
Legal proceedings instituted	8

Food condemned as unsound:

Vide Food in Relation to Health and Disease page 61.

Lodging Houses:

There are no common lodging houses in Gibraltar.

The Public Markets

The Meat Hall and poultry stalls were painted throughout, and repairs, and in places renewal of the pavement of some of the alleys were completed during the year. The re-flooring of the Meat Hall was deferred pending consideration of the most suitable material to be used for the purpose.

Food

Supplies of food have been adequate throughout the year.

Meat

Frozen meat and offal imported from the United Kingdom and Australia jointly with supplies destined for the Services were kept in refrigerators by the Army Authorities, and issued to butchers as and when required. Considerable quantities of frozen beef, mutton, veal and offal from the same sources, and frozen pork from Denmark and Northern Ireland, were also imported privately by the butchers.

The retail prices of frozen beef ranged from 1/8d. to 3/3d. a pound according to quality and cut, veal from 3/- to 3/6d a pound, mutton from 1/4d. to 2/9d. a pound, and offal from 1/6d. to 4/6d. a pound, according to kind.

Danish and Irish pork was retailed at 3/9d. to 4/6d. a pound.

Small quantities of Kosher meat were imported by special arrangements from Spain and Tangiers for the exclusive use of the Hebrew Community.

Importations of fresh veal and pork from Spain were negligible.

There were fluctuations in the quantities of poultry and game imported from Spain, but generally supplies were adequate to meet the needs of the public. Frozen fowls and rabbits were also imported from Australia, Northern Ireland and Denmark.

Eggs

Adequate supplies of fresh eggs were imported from Spain and Morocco throughout the year, the prices ranging from 3/10d. to 5/6d. per dozen Spanish, and 3/2d. to 4/6d. per dozen Moorish.

Fruit and Vegetables

Abundant supplies of fresh fruit and vegetables mostly of excellent quality were introduced daily from Spain throughout the year, and were sold in the Markets, numerous shops in town or in the streets by licensed itinerant vendors. The prices of these commodities may be considered to have been unduly high compared with those in the Spanish markets. There has been a decrease in the average number of daily licences issued to itinerant fruit and vegatables vendors for the past two years. From sixty in 1954 to fifty-eight in 1955, and fifty-four in 1956.

Fish

Importations of fish from Spain showed a marked fall compared with the preceding year. An average of 2,000 pounds were imported daily which represents a decrease of 850 pounds compared with 1955. Long spells of unfavourable weather have probably been a factor in causing the decrease.

The average daily importations for the years 1952 to 1956 have been 1,645, 1,650, 2,280, 2,850 and 2,000 pounds respectively. Small quantities have also been contributed by local fishing boats and from Catalan Bay Village.

Marked fluctuations in the supplies of fish caused by weather conditions and other factors outside the control of the Markets Authorities have influenced the retail prices, but do not altogether account for the considerable general increase which has occurred since the preceding year. This has not been peculiar to Gibraltar, in fact, notwithstanding the increase, prices have on the whole compared favourably with those obtaining in the Spanish Markets.

All fish was inspected by the Markets Inspectors before it was exposed for sale in the Markets or allowed to be sold in the streets by licensed itinerant fish vendors.

The average number of licences issued daily to itinerant vendors was 22, the same as in the previous year.

Milk

The amount of fresh milk consumed by the public is negligible, condensed or evaporated tinned varieties are the staple products commonly used.

Reconstituted milk processed locally from skimmed milk powder by the addition of edible fats and vitamins and subsequently pasteurized has also been available during the year.

An average of approximately one hundred litres of fresh milk were imported daily from Spain, which in compliance with

the Milk and Dairies Bye-Laws is heated to a temperature of 200°F for twenty minutes before it is sold to the public.

Following the issue of stern warnings regarding unsatisfactory conditions in a dairy, the premises were vacated by the purveyor concerned.

Groceries

Supplies of groceries imported from the United Kingdom and other countries have been adequate and of satisfactory quality.

Ice-Cream

All premises wherein ice-creams are manufactured must be registered with the City Council in accordance with the provisions of the Food and Drugs Ordinance, and registration is subject to the premises and equipment being declared satisfactory by the Medical Officer of Health.

The manufacture and sale of ice-creams was strictly controlled by the Department's Inspectors who paid frequent visits to the establishments concerned, and obtained samples of the products for bacteriological examination at the Council's Public Health Laboratories. The owners of two firms whose ice-creams failed to attain a satisfactory standard were warned and remedial measures were adopted.

Considerable quantities of ice-creams manufactured by reputable firms in Great Britain were also imported regularly during the hot season. The sale of these products is conditional to their being sold in the original sealed wrappers or containers as issued by the manufacturers, and subject to the same sanitary requirements as those produced locally.

Samples of these ice-creams were taken regularly and found satisfactory on bacteriological examination.

The sale of ice-creams in the streets, sports grounds and other public places by itinerant vendors is strictly controlled. The products must be sold in the original wrappers and the vehicles used must be submitted for inspection and approval before licences are issued.

Eating Houses, Confectioneries and Cafes

All premises wherein meat or fish is prepared by any process of cooking or which are used for the preparation or manufacture of sausages, potted, pressed, pickled or preserved food must be registered with the City Council in compliance with the provisions of the Food and Drugs Ordinance, whilst pur-

veyors and vendors of refreshments, confectionery, cakes, sweets, fruit or shell fish as well as the premises used for these trades must be registered under the Council's Food Bye-laws.

All food catering establishments were inspected regularly at frequent intervals by the Department's Inspectors. Two thousand, one hundred and forty-five visits were paid during the year in the course of which advice was given to the owners on food hygiene and on all matters concerning the storing, handling and preparation of food destined for human consumption.

Though it may be said that there has been a general improvement in the arrangements, design and equipment of premises newly opened for use as catering establishments, the conditions in some of the smaller old eating houses and in the kitchens of some cafes offering snacks often fall short of what is desirable, and only just conform with the minimum requirements of the recognized principles of food hygiene. Whilst admitting that lack of space and of a liberal supply of hot and cold water render it difficult to attain the highest standards possible, I am not satisfied that the best use is always made of the space and facilities available, and places which with a little thought, care and neatness in the storing of material and deploying of equipment could be considerably improved often give the impression of an untidily kept junk shop, though on the whole they are otherwise kept resasonably clean. Facilities for washing of hands by employees are sometimes rather primitive, and towels could be changed more frequently to impress on employees the importance of washing of hands. The clothing of kitchen attendants often leaves much to be desired, frequently no overall is used and when used is often stained or discoloured. The arrangement in one restaurant where the kitchen is separated from the dining-room by a glass screen which renders the processing of food visible to the consumer, could with advantage be adopted where possible. As a stimulus to the upkeep of tidiness and cleanliness on the part of the kitchen staff, it is difficult to suggest anything better. Though the standards kept in the places where the food is actually served are generally satisfactory, in fact, in the majority of establishments they are kept spotlessly clean, customers in some cafes are apt to throw cigarette ends, papers and empty cartons on the floor, a practice which to say the least is very objectionable. Proper receptacles should be provided and customers should be required to use them. Order and neatness facilitate and promote cleanliness, untidiness renders the maintenance of satisfactory cleanliness all the more arduous and difficult or impossible.

Food Poisoning

No notifications of food poisoning were received during the year. Though this may be interpreted to exclude the occurrence of major outbreaks of these affections, I have no doubt that many individual and familial incidents occurred which were not notified.

Food Legislation

The new Food (General) Bye-Laws, Markets Bye-Laws, and Pedlars and Street Vendors Bye-Laws which were made by the Council in 1955 and upon which I commented in my Annual Report for that year, came into operation on the 1st January, 1956.

Condemnation of Food

The following foods were found unfit for human consumption and condemned:—

	Health Department Inspectors	*Market Inspectors*
Ox Livers		31 pounds
Ox Kidneys		2 pounds
Fowls		24 pounds
Turkeys		25 pounds
Anchovies		70 pounds
Conger Eel		25 pounds
Whiting		20 pounds
Bream		65 pounds
Gurnard		15 pounds
Sword Fish		70 pounds
Skate		20 pounds
Frozen Beef	4,585 pounds	
Frozen Mutton	1,201 pounds	
Sausages	2,310 pounds	
Tinned Ham	829 pounds	
Bacon	325 pounds	
Luncheon Meat	234 pounds	
"Salami"	277 pounds	
Fresh Fish	1,260 pounds	
Smoked Herrings	616 pounds	
Smoked Haddock	330 pounds	
Smoked Salmon	21 pounds	
Cod Fish	1,964 pounds	
Frozen Chicken	1,048 pounds	
Evaporated Milk	840 tins	
Fresh Milk	14 bottles	
Cheese	170 pounds	

	Health Department Inspectors	*Market Inspectors*
Potatoes	110,000 pounds	
"Kaviar"	126 pounds	
Confectionery	198 pounds	
Margarine	28 pounds	
Spaghetti	44 pounds	
Cakes	70 pounds	
Corned Beef	14 pounds	
Chopped Pork	8 pounds	
Baby Products	116—1¼lb. tins	

HOUSING AND TOWN PLANNING

I am indebted to the Commissioner of Lands and Works for information regarding the Government Housing Scheme which is included in this section of the report.

A block of dwellings comprising forty-eight flats which had been placed under construction in 1955 was completed and put into service during 1956, whilst the erection of three blocks which it is envisaged will provide a total of fifty-six flats was started during the year.

In pursuance of the Housing Scheme, one thousand and thirty-nine flats have been built by the Colonial Government since 1945. These include one hundred and seventy-three flats which have been provided by the conversion or adaptation of existing buildings, but do not include four hundred and sixty-two tenements of a purely temporary character which will eventually be demolished and replaced by permanent buildings as the Scheme gradually develops. Thus it may be said that a total of one thousand, five hundred and one dwellings have been provided by the Government since the repatriation of the population notwithstanding which the lack of accommodation and the degree of overcrowding is still considerable and a source of grave concern to the Health and the Housing Authorities.

The number of houses built privately has been small in comparison and have either been occupied by the owners themselves or let as furnished or unfurnished tenements at rentals which are prohibitive to the average person seeking accommodation.

I have to stress again the urgent need of providing alternate temporary accommodation, the lack of which seriously interferes with new building projects and the carrying out of necessary repairs to existing houses.

Town Planning

The Central Planning Commission appointed under the provisions of the Building (Interim Control) Ordinance continued to meet regularly during the year. At these Meetings plans for the erection of new buildings, improvements to existing structures and other constructional projects were considered. The said Ordinance does not in any way detract from the powers vested in the City Council by the provisions of the Public Health Ordinance, and seventy-four applications for permission to effect structural alterations to existing premises or to erect new buildings were considered and reported on under these powers.

AMBULANCE SERVICE

Two ambulances are maintained by the City Council which though primarily intended for the conveyance of persons suffering from infectious diseases, constitute the only official Ambulance Service for the transport of civilian patients from Town, those landed from the Bay, and by special arrangements from Spain.

A privately owned and operated ambulance has also been available to the public during the year.

A total of two hundred and sixty-eight patients, two hundred and ten from Town and fifty-eight from the Bay, were conveyed by the Council's ambulances during the year.

Ten local patients and two landed from the Bay were suffering or suspected of suffering from infectious diseases, the others had been involved in accidents or were suffering from non-infective conditions.

	Local Cases	Bay Cases
Tuberculosis	4	—
Typhoid Fever	1	1
Pneumonia	3	1
Bronchitis	2	1
Mumps	1	—
Measles	1	—
Appendicitis	1	7
Heart Disease	47	3
Cancer	4	—
Maternity Cases	9	1
Mental Cases	14	1
Fractures and Injuries	24	14
Miscellaneous (medical and surgical cases)	99	29
	210	58

DISINFECTION

Disinfection of bedding, clothing, etc., continued to be carried out at the Disinfection Station in Line Wall Road.

Table below gives details of the work done at the station during 1956.

Months	Beds and Mattresses	Bolsters and Pillows	Blankets and Quilts	Sheets	Counter panes	Water Vendors' Barrels	Sundries	Totals
January	53	37	51	51	16	230	66	504
February	30	19	35	24	8	284	71	471
March	28	33	34	14	4	228	13	354
April	19	27	21	11	4	216	24	322
May	18	14	17	14	7	270	45	385
June	216	77	119	33	10	216	42	713
July	18	17	16	22	3	285	16	377
August	7	10	1	8	2	218	3	249
September	4	6	2	4	—	216	2	234
October	2	—	6	—	—	270	30	308
November	2	—	—	—	—	153	—	155
December	1	2	2	2	—	108	3	118
Totals	398	242	304	183	54	2,694	315	4,190

MEDICAL WORK DONE FOR THE COUNCIL

Sixty-two Council employees were medically examined during the year. The majority were routine examinations to determine the fitness of applicants for employment, a few were for the purpose of making recommendations related to retirement from the Council's service for reasons of health.

Applicants suspected of suffering from Pulmonary Tuberculosis were referred to the Colonial Government Medical Specialist at King George V. Hospital for radiological examination.

All workmen engaged in handling tar or tar products in the Council's Gas Department were examined for early signs of tar dermatitis, but no evidence of this condition was found in any of these employees.

January	3
February	9
March	4
April	5
May	7
June	5
July	3
August	4
September	11
October	—
November	4
December	7
Total	62

OTHER MATTERS CONCERNED WITH THE HEALTH OF GIBRALTAR

Board of Health

The Advisory Board of Health is a statutory Board constituted by the Governor under the powers vested in him by the Public Health Ordinance and is the principal co-ordinating body in medical matters between the Medical Services of Her Majesty's Armed Forces, the Colonial Government Medical Service, and the Public Health Service.

The following is a brief summary of the subjects discussed, and on which recommendations were made at meetings which were held regularly throughout the year:—

Supplies of oxygen for medical purposes.

Control of the sale of Sulphonamides, Antibiotics, Barbiturates and so called "Tranquilizers."

Smoke from factories and exhaust fumes from motor vehicles.

Isolation Hospital for the pestilential diseases.

Control of dogs and cats, and provision of facilities for the quarantining of these animals for short periods when in transit.

Granting of Pratique to ships by Radio.

Granting of right of way to Ambulances.

Yellow Fever documentation required from passengers arriving in aircraft from West Africa.

Amendments to the International Sanitary Regulation 1955, and matters related to other Conventions.

Camp for emigrants in transit through Gibraltar.

General Practitioners Service

The number of medical practitioners engaged in general practice appearing on the register on the 31st December, 1956 was nine, which represents an increase of two compared with the corresponding date in 1955, and a ratio of approximately 1 to 2,700 population.

Four hold part-time appointments with the Colonial Government which promotes closer co-operation between the hospitals, child welfare services and general practitioners, and redounds to the benefit of both patients and doctors.

Nursing Services

The number of nurses included in the Register under the provisions of the Nurses Registration Regulations on the 31st December, 1956 was twenty, the same as on the previous year. Of these, eleven are females and nine in males. With the exception of two female nurses who are State Registered but are no longer in practice, all are employed in the Colonial Hospital.

The number of midwives registered under the Midwives Ordinance remained at five.

These figures do not include the Colonial Nursing Sisters.

With the exception of two district nurses who only attend indigent patients, there are no qualified nurses engaged in domiciliary work, though the need for them is becoming daily more pressing.

The training of recruits continues at the Government Nurses Training School. A number of these students will go to the United Kingdom to undergo the necessary studies to enable them to obtain state registration.

District Medical Services

A medical officer of the Colonial Hospital assisted by two district nurses provides medical treatment and care for the indigent sick and the aged at a special clinic held daily in the Exchange Buildings, and by domiciliary visits when necessary.

Legislation relevant to Medical and Public Health Interests enacted during the year

The Food (General) Bye-Laws, the Markets Bye-Laws and the Pedlars and Street Vendors Bye-Laws which were made by the Council in 1955 and upon which I commented in my Annual Report for that year came into force on the 1st January, 1956.

The Factories Ordinance, 1956 which came into force on the 1st of August and a number of regulations and orders which were subsequently made under the provisions of the Ordinance, can be considered to be the most important legal instruments from a public and industrial health aspect enacted during the year. The Ordinance which follows closely the Factories Act, 1937 and 1948 in the United Kingdom makes provision for the health, safety and welfare of persons employed in factories and other places, and for matters incidental thereto.

The Shops (Time of closing and Sunday opening) Order, 1956, which came into force on the 1st May, made under the provisions of the Shop Hours Ordinance regulates as its name

implies the time of closing of shops and prescribes inter alia that shops be closed from 1 p.m. to 3 p.m. every day throughout the year.

The Annual and Public Holidays General Standard Order, 1955 came into force on the 1st January, 1956 and makes provisions for the granting of annual holidays on pay to employees.

Several important amendments were made to the Pensions Ordinance and to the Regulations which redound to the benefit of retiring officers.

The Colonial Hospital Rules, 1955 have been amended in respect of some fees chargeable for consultations and certain forms of treatment.

An Order made under the provisions of the Dangerous Drugs Ordinance declares that Part III of the Ordinance shall apply to the following drugs and any preparation, admixture, extract or other substance containing any proportion thereof:

1: 3-Dimethyl-4-phenyl-4-proprionyloxyhexamethyleneimine.

3-Hydroxy-N-phenethylmorphinan.

4-Morpholino-2: 2-diphenyl ethyl butyrate.

4-Dimethylamino-1: 2-diphenyl-3-methyl-2-propionyloxybutane.

International Sanitary Regulations. Gibraltar accepted without reservations the amendments to these regulations which came into force on the 1st October, 1956. These amendments concern principally matters related to the control of Yellow Fever.

PUBLIC HEALTH LABORATORIES

Report of the Pathologist-Analyst, Gibraltar.

The volume of work carried out in the Laboratories continues to increase at a rapid pace. Samples were submitted from numerous sources and investigations of a bacteriological, serological, biochemical, histological, haematological and analytical nature were undertaken amounting to a total of twenty-one thousand, six hundred and thirty-two. This represents an increase of three thousand and fifty-eight over the previous year's total.

The number of investigations carried out in the Laboratories during 1956 has practically quadrupled since 1939, and in fact almost doubled in the past seven years. The following figures illustrate the increasing demands made upon the Laboratories for assistance in the preventive, diagnostic and curative aspects of public health and medicine in its widest sense :—

YEAR	INVESTIGATIONS
1939	5,612
1949	11,167
1950	13,632
1952	15,844
1954	17,868
1955	18,574
1956	21,632

A considerable number of samples of goats milk declared skimmed, and a variety of specimens of groceries were examined under the provisions of the Food and Drugs Ordinance. The samples of goats milk persistently showed a high fat content which was more consistent with the milk having undergone a process of "scumming" rather than skimming. All the other specimens were found to be genuine.

Seventy-seven Yellow Fever vaccinations were carried out on persons travelling mainly to West Africa. Until recently, with the exception of Casablanca, Gibraltar was the most convenient port equipped with a laboratory recognised for this purpose by the World Health Organization, and a considerable proportion of those vaccinated came from Tangier and adjacent parts of North Africa.

SUMMARY OF INVESTIGATIONS CARRIED OUT IN THE CITY LABORATORIES

SPECIMEN	Civil	Colonial Hospital	K.G..V. Hospital	Navy	Military	Total
BLOOD						
Wassermann Reaction	83	170	129	3	—	685
Kahn	675	470	129	3	—	1,277
G.C.F.T.	5	1	—	—	—	6
Widal (Agglutination Test)	224	168	105	—	—	497
Paul Bunnell	2	4	6	—	—	12
Bleeding and coagulation time	8	—	—	—	—	8
E.S.R.	76	133	2	—	—	211
Urea	28	76	39	—	—	143
Malaria	6	2	1	—	—	9
Sugar	273	119	49	—	—	441
Rhesus Factor	7	421	27	—	—	455
Grouping	7	425	27	—	—	459
Red Cells Count	202	684	242	—	—	1,128
White Cells Count	228	395	238	—	—	861
Differential Count	212	378	170	—	—	760
H.b	201	978	258	—	—	1,437
Picture	—	1	3	—	—	4
M.C.D.	4	—	4	—	—	8
C.I.	199	671	231	—	—	1,101
Culture	18	12	40	—	—	70
Calcium	3	3	6	—	—	12
Uric Acid	1	—	1	—	—	2
Cholesterol	3	8	30	—	—	41
Alkaline Phosphatase	5	9	13	—	—	27
Van den Bergh	—	—	2	—	—	2
Plasma proteins	6	12	22	—	—	40
Cold Agglutination Test	—	2	8	—	—	10
Chlorides	—	7	11	—	—	18
Albumen	6	10	22	—	—	38
Globulin	6	10	22	—	—	38
Bilirubin	5	9	12	—	—	26
A/G. Ratio	6	11	21	—	—	38
Film	2	74	5	—	—	81
Acid Phosphatase	4	6	11	—	—	21
Platelets and Eosinophiles	3	5	5	—	—	13
Potassium	1	13	18	—	6	38
Thymol turbidity	4	4	12	—	—	20
Thymol Flocculation	4	4	12	—	—	20
Coombs test	1	—	—	—	—	1
Cell Fragility	2	—	—	—	—	2
Cross Matching	—	4	—	—	—	4
Prothrombin test	—	12	234	—	—	246
Bone Marrow (Myelogram)	1	1	9	—	—	11
Sodium	2	14	23	—	6	45
Zinc Sulphate turbidity	3	4	0	—	—	17
Salicylate	1	—	—	—	—	1
CO^2 Combining Power	—	6	14	—	3	23
Creatine	—	1	1	—	—	2
Bergers Victoria Blue Test	—	1	—	—	—	1
Sodium Chloride	—	3	—	—	—	3
M.C.V.	2	1	12	—	—	15
M.C.H.	2	1	14	—	—	17
P.C.V.	2	1	17	—	—	20
M.C.H.C.	1	1	6	—	—	8
CULTURE FOR ORGANISMS	34	164	20	—	—	218
Sensitivity to Penicillin	34	164	20	—	—	218
Sensitivity to Streptomycin	34	164	20	—	—	218
Sensitivity to Chloranphenicol	34	164	20	—	—	218
Sensitivity to Terramycin	34	164	20	—	—	218
Sensitivity to Aureomycin	34	164	20	—	—	218
SWABS						
K.L.B. Gram stain for organisms	76	62	1	—	—	139
K.L.B. Culture (Loeffler Serum)	78	214	7	—	—	299
K.L.B. Culture (Hoyles Tellurite Medium)	49	214	6	—	—	269
Vincent Gram	9	31	1	—	—	41
C.S.F.						
Wassermann	—	3	15	—	—	18
Lange's Curve	—	3	14	—	—	17
Cells Count	—	14	16	—	—	30
Protein	—	10	16	—	—	26
Chlorides	—	10	8	—	2	20
Globulin	—	—	2	—	—	2
Glucose	—	12	5	—	2	19
Culture	—	10	1	—	1	12
Albumen	—	—	—	—	—	—
Ross Jones	—	—	1	—	—	1
Gram	—	8	—	—	—	8
T.B.	—	—	3	—	—	3
SPUTUM						
T.B.	24	31	948	—	—	1,003
Culture	17	6	17	—	—	40
Malignant cells	1	—	6	—	—	7
Fungi, Hydatid Cyst	—	—	4	—	—	4
FAECES ...						
Culture	182	96	30	—	—	308
Microscopical, ova, etc.	61	66	8	—	—	135
Occult Blood	5	18	9	—	—	32
Protein	—	—	1	—	—	1
Fat	—	15	8	—	—	23
Urobilinogen	1	—	—	—	—	1
GASTRIC CONTENTS						
F.T.M.	9	1,526	312	—	—	1,847
Microscopical Blood	—	12	—	—	—	12
ABDOMINAL FLUID						
Culture	—	—	8	—	—	8
Cells	—	—	7	—	—	7
T.B.	—	—	8	—	—	8
PLEURAL FLUID						
Culture	—	—	4	—	—	4
Cells Count	—	—	2	—	—	2
Protein	—	—	3	—	—	3
T.B.	—	—	4	—	—	4
Malignant Cells	—	—	5	—	—	5
PUS						
Culture	7	29	9	—	—	45
Microscopical (G.C.)	30	36	6	—	—	72
T.B.	3	5	5	—	—	13
URINE						
Chemical	1,808	836	132	—	—	2,776
Microscopical	329	234	33	—	—	596
Culture	24	151	26	—	—	201
Acetone	—	7	—	—	—	7
Bile pigment	54	16	6	—	—	76
Urea	—	11	4	—	—	15
T.B.	3	75	7	—	—	85
Calcium	—	1	—	—	—	1
Urobilinogen	6	—	—	—	—	6
Bilirubin	5	—	—	—	—	5
Bile Salts	3	—	—	—	—	3
Malignant cells	—	—	1	—	—	1
17 Ketosteroids	—	2	1	—	—	3
Ehrlich's test	—	3	—	—	—	3
Phenylhydrazine test	—	2	—	—	—	2
SODIUM CITRATE BOTTLE (Culture)	—	20	—	—	—	20
CALCULUS (Chemical)	2	—	—	—	—	2
D.G.I.	4	7	—	—	—	11
HISTOLOGICAL	5	155	13	—	—	173
RATS (For Plague)	17	—	—	—	—	17
INOCULATIONS (Yellow Fever Vaccine)	77	—	—	—	—	77
HAIR (Ringworm)	2	3	—	—	—	5
SKIN (Scraping) Fungus)	—	2	—	—	—	2
AUTO VACCINE	—	—	1	—	—	1
WATER (B. Coli)	309	—	—	34	—	343
,, Chemical Chlorine	546	—	—	52	—	598
,, Plate Count	5	—	—	4	—	9
MINERAL WATER (B. Coli)	16	—	—	—	—	16
SAMPLE OF EARTH (Chemical)	—	—	—	—	1	1
BREAST MILK (Chemical)	2	—	—	—	—	2
SEMINAL FLUID (Count 5, Mobility 5, Morphology 5, Volumen 5)	20	—	—	—	—	20
F. & D. A. Goats Milk (Chemical)	133	—	—	—	—	133
Supermilk (B. Coli)	4	—	—	—	—	4
Supormilk (Methylene Blue Test)	6	—	—	—	—	6
Cinnamon	2	—	—	—	—	2
Granulated sugar	5	—	—	—	—	5
Tea	5	—	—	—	—	5
Alcohol	18	—	—	—	—	18
Coffee	4	—	—	—	—	4
Lard	2	—	—	—	—	2
Butter	12	—	—	—	—	12
Brandy	27	—	—	—	—	27
Ice Cream	28	—	—	—	—	28
Olive Oil	6	—	—	—	—	6
Ferguson's Freshmilk	8	—	—	—	—	8
Jam	7	—	—	—	—	7
Flour	—	—	—	3	—	3
Orange and Lemon Powder	16	—	—	—	—	16
TOTALS	6,810	10,585	4,117	99	21	21,632

Three candidates for the Class II Army Medical Laboratory Technology Examination were given their Viva Voce section at the laboratory, the Pathologist-Analyst and the Chief Laboratory Technician having been nominated external examiners for the purpose.

The Laboratory Staff has been increased during the year by a Lady Typist Receptionist. This has proved a great benefit for the smooth running of the Department.

In conclusion the year has shown a general increase in the volume of work in all branches, and we in the Laboratory now look forward to an increase in the bench space which has become an urgent necessity.

E. A. IMOSSI,

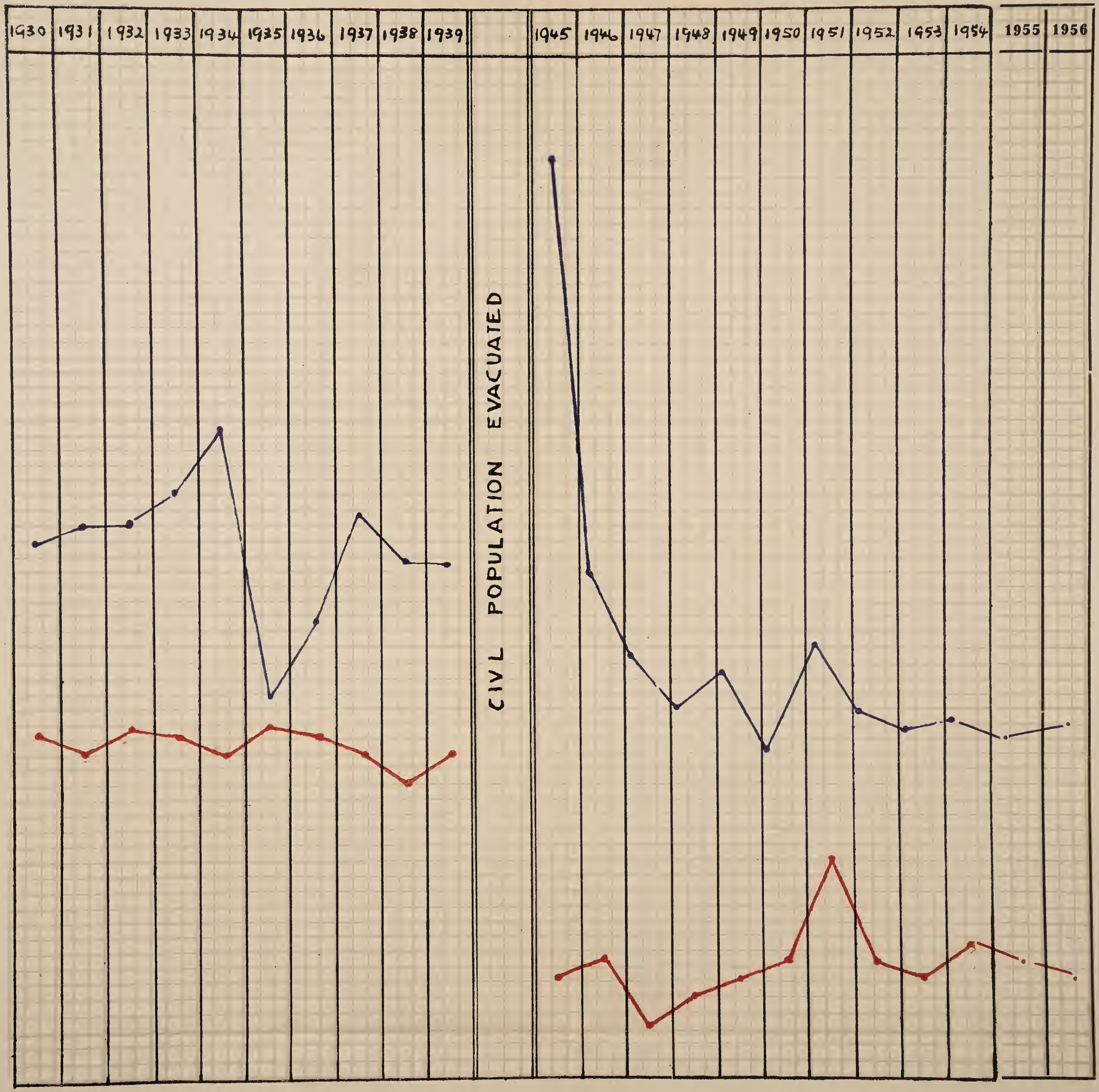
City Pathologist-Analyst,

Gibraltar.

Laboratories, 6th May, 1957.

COMPARTIVE CHART OF BIRTH AND DEATH RATES PER 1000 CIVIL POPULATION

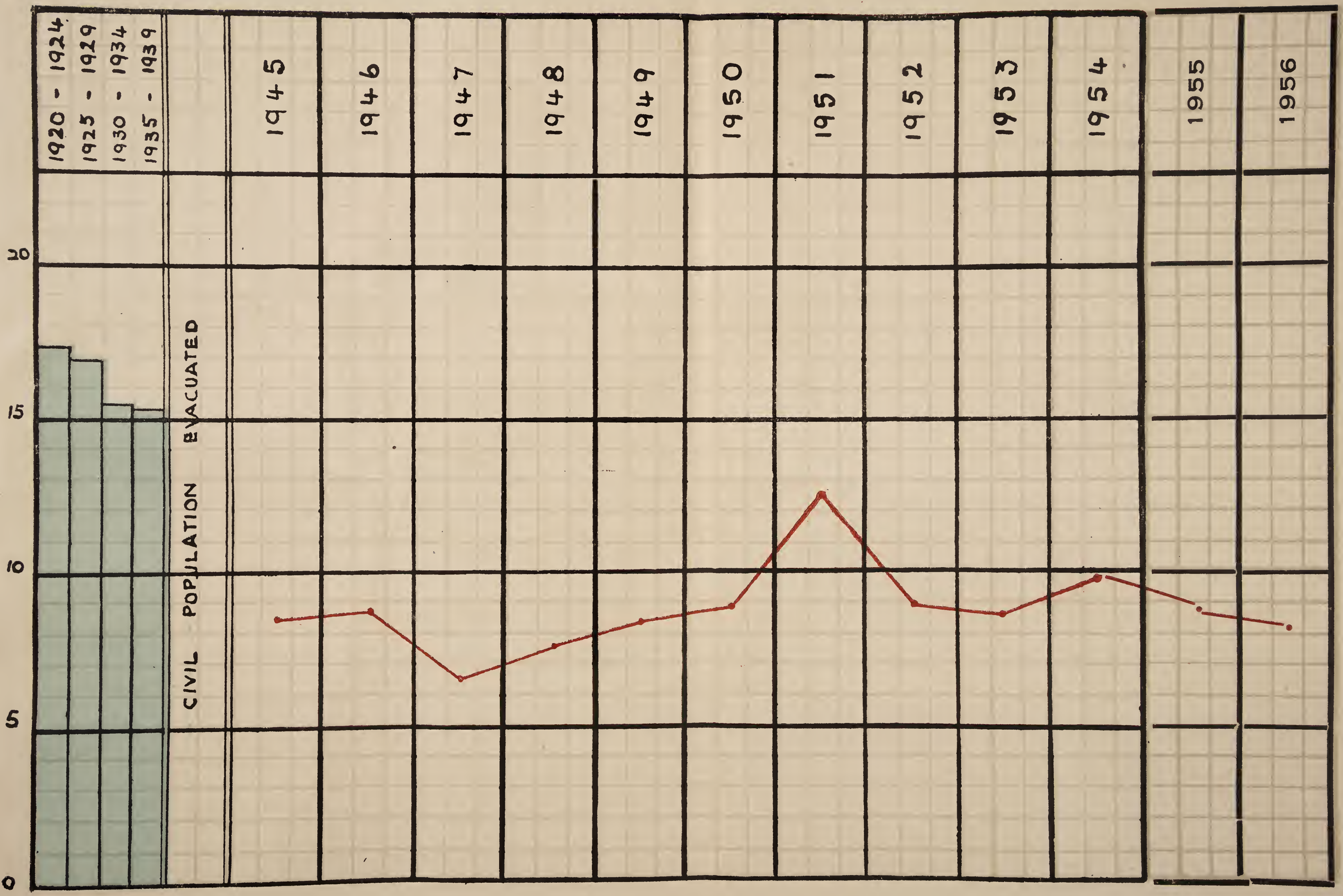
FOR THE PERIODS 1930-1939 & 1945-1956



BIRTHS ... BLUE

DEATHS ... RED

DEATH RATE PER 1000 CIVIL POPULATION FOR THE PERIODS 1920-1929 1930-1939 & 1945-1956



AVERAGES

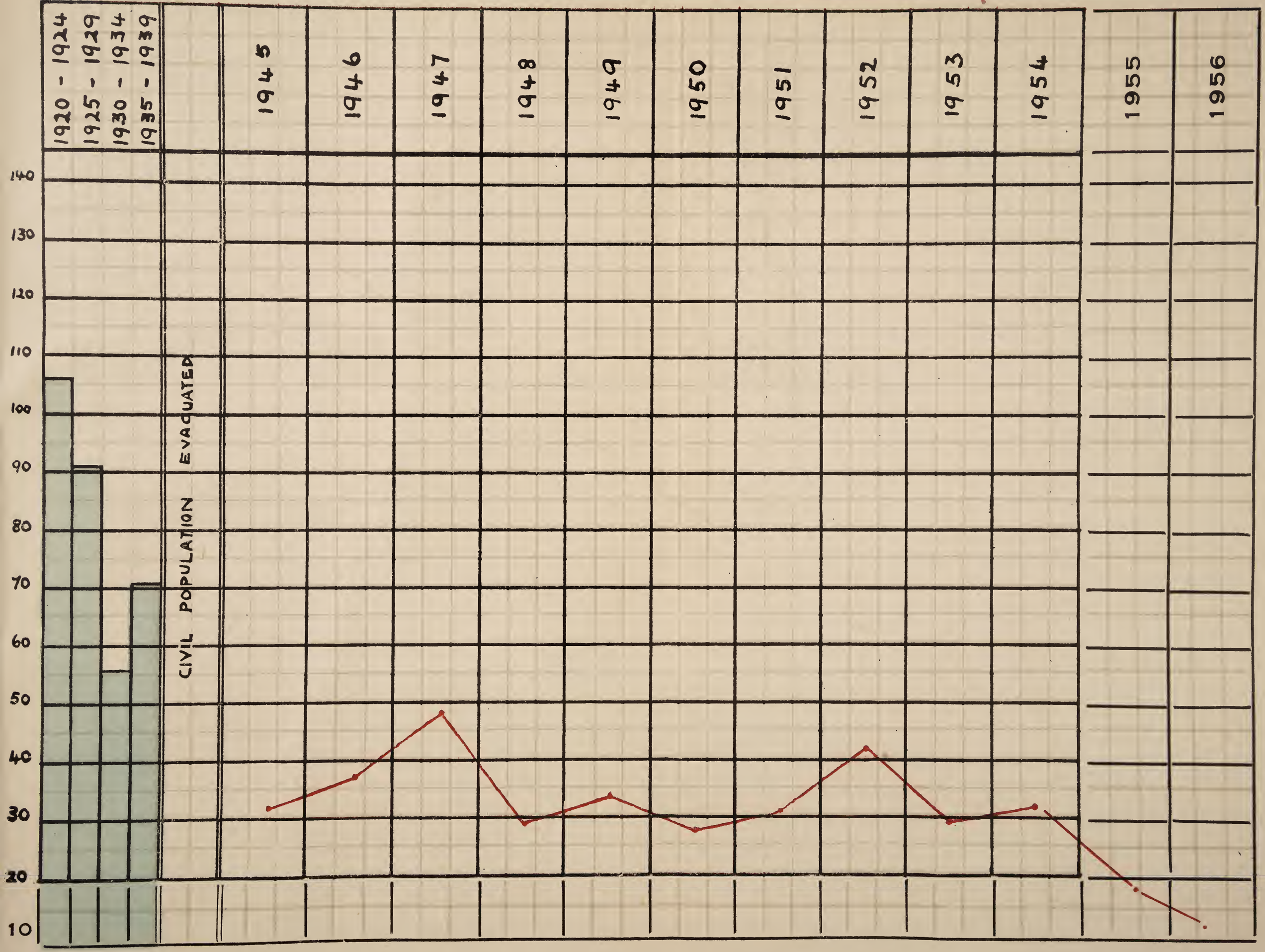
1920-1924 = 17.18
1925-1929 = 16.96
1920-1929 = 17.07

1930-1934 = 15.49
1935-1939 = 15.35
1930-1939 = 15.42

1945-1949 = 7.92
1949-1954 = 9.44
1945-1954 = 8.68

1955 = 8.66
1956 = 8.27

INFANT MORTALITY PER 1000 BIRTHS CIVIL POPULATION FOR THE PERIODS 1920-1929, 1930-1939 & 1945-1956



AVERAGES

1955 — 18.76. 1956 — 13.05

1920-1924 — 106.9	1930-1934 — 57.4	1945-1949 — 36.0
1925-1929 — 91.7	1935-1939 — 70.3	1950-1954 — 31.9
1920-1929 — 99.3	1930-1939 — 63.4	1945-1954 — 33.9